

Charter Oak Church Student Ministry Release Form

Date: _____ Event: _____
Student Name: _____ Phone: _____
Address: _____ e-mail: _____
_____ Grade: _____

I give my permission for the above named child to attend Charter Oak Church Student Ministry's event. I understand that they will be transported by licensed drivers over the age of 25 as per Charter Oak Church policy.

I hereby release Charter Oak Church, its staff, and its sponsors and or leaders from responsibility and liability for any injury or illness that my child may sustain during this activity. In case of emergency, I authorize an adult leader, as an agent for me, to consent to an x-ray exam, medical, or dental, or surgical diagnosis; treatment; and hospital care advised and supervised by a physician, surgeon, or dental (as appropriate) licensed to practice under the laws of the state where the service is rendered.

I give permission for my student to be photographed Yes _____ No _____

I expect to be contacted as soon as possible in case of emergency.

Signature of parent or legal guardian

Please print name

Emergency Contact (please print) phone number

Medical Information

Allergies: _____

Medications to be taken: _____ how administered: _____

Physical handicaps or limitations: _____

Medical insurance company: _____

Policy holder: _____

Policy number: _____

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