
2011 MEDICAL/LIABILITY/MEDIA RELEASE FORM

Student/Participant Name	Date of Birth
Address	City, State, Zip
Home Phone	Student/Participant Cell Phone
Parent/Guardian (if participant is under 18 years of age)	Parent Cell Phone
Medical/Health Insurance Company	Insurance Policy No.
Preferred Hospital	Doctor's Name
In case of emergency, please notify	Phone
In case of emergency, please notify	Phone

Health History

Allergies/Reactions
Current Medications and Dosage
Medical Conditions
Physical Conditions which may inhibit participation
Activity Restrictions, i.e. swimming



Release of Liability

I (we), being 18 years of age or older, do for myself and for and on the behalf of my (our) child/participant (if said child is not 18 years of age or older) do hereby release, forever discharge and agree to hold harmless Lake Tapps Christian Church and all staff, volunteers or other personnel from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the child/participant that occur while said child/participant is participating in any Lake Tapps Christian Church trip/activity.

Furthermore, I (we) on behalf of my (our) child/participant (if under the age of 18 years old) hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and other activities involved therein. Further, authorization and permission is hereby given to said Church to furnish any necessary transportation, food and lodging for the participant.

The undersigned further hereby agrees to hold harmless and indemnify said Church, its directors, employees and agents, for any liability sustained by said Church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

Emergency Medical Authorization

Should an emergency situation arise, I hereby authorize Lake Tapps Christian Church and all staff, volunteers or other personnel who are 18 years of age or older, who supervise said Church trips/activities, to consent to medical care and/or dental care for myself and/or my child. The authority granted by this authorization includes consent to any x-ray examination, anesthetic, medical, or surgical diagnosis or treatment and hospital care under the general or special supervision and upon the advice of or to be rendered by a physician and surgeon licensed under the Medical Practice Act for my child. This authority also extends to any x-ray examination, anesthetic, dental or surgical diagnosis or treatment and hospital care by a dentist licensed under the Dental Practice Act for my child.

I further authorize Lake Tapps Christian Church and all staff, volunteers or other personnel who are 18 years of age or older, who supervise said Church trips/activities to receive physical custody of my child upon completion of any treatment, and I specifically instruct any treating health facility to surrender physical custody of my child to Lake Tapps Christian Church and all staff, volunteers or other personnel who are 18 years of age or older, who supervise said Church trips/activities.

It is understood that this authorization is given in advance of any special diagnosis, treatment, or hospital care being required, but is given to provide authority and power on the part of the supervisor and his/her authorized designee, in the exercise his/her best judgment on what is advisable for myself or my child's care, upon advice of such physician, dentist, and surgeon.

Signature

Today's Date



Media Release

I, _____, being 18 years of age or older, do for myself and for and on the behalf of my child/participant (if said child is not 18 years of age or older) do hereby release Lake Tapps Christian Church to feature myself or my child in the following ways and without compensation:

(Please initial all of the following that apply.)

___ Photos, Video, and/or Quotes in Lake Tapps Christian Church Media Publications

___ Photos, Video, and/or Quotes on Lake Tapps Christian Church Web Sites

___ I do not want myself/my child to be featured.

Signature

Today's Date