

ANEWChurch.TV YOUTH Permission and Release Form

Name _____ Date of Birth _____

Sex _____ Parent/Guardian Name _____

Work/Cell Phone _____ Work/Cell Phone _____

Hold Harmless: I will not hold AnewChurch or it's leaders responsible for injury or harm to my child at events on the property or off site. They will participate at their own risk.

EMERGENCY MEDICAL TREATMENT: In the event of an emergency, I give permission to transport my child to a hospital. I agree to allow my child to receive emergency medical treatment at my expense at the discretion of the event sponsor. I wish to be advised prior to any further treatment by a doctor or hospital. In the event of any emergency, if you are unable to reach me at the above numbers, contact:

Name	Relationship	Phone Number
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HEALTH INFORMATION:

Medication my child is taking at present _____

For headache or minor pain, my child may be given _____

Allergies _____

Other Medical Conditions _____

Insurance Company _____

Family Health Plan carrier number _____

Family Doctor _____

Phone Number _____

I, _____, GIVE PERMISSION FOR

_____ Parent or Guardian Name Child Name

TO PARTICIPATE in the Church activities. I warrant that my child is in good health. I agree to drop my child off at the departure location at least 15 minutes prior to departure and to provide transportation home at my expense. I agree that I am responsible for my child's conduct and actions. The event sponsor is not responsible for any injury or damage incurred or caused by my child. I understand that my child is required to comply with the Code of Conduct provided by Staff or Sponsors while participating in the event. I understand that if my child violates the Code of Conduct he/she may be required to be transported home at my expense.

Parent/Guardian Signature _____ Date _____