

**CHURCH OF THE REDEEMER
CHILDREN & YOUTH ANNUAL MEDICAL RELEASE FORM
2010/2011**

Participant's Name _____

Sex _____ Date of birth _____ Grade in School _____

Today's date _____ Redeemer Parish Member Yes No

Home Address _____

City / State / Zip _____

Name of Parent/Guardian: _____

Home # _____ Work # _____ Cell # _____

Insurance Company _____

Policyholder's Name _____

Relationship to Policyholder _____

Policy Number _____

Family Physician _____

IN CASE OF EMERGENCY PLEASE CONTACT _____

Relationship _____

Home # _____ Work # _____ Cell # _____

MEDICAL INFORMATION:

Does your son/daughter have any allergies? _____ Yes _____ No

If yes, please list:

Is he/she presently taking any medications? _____ Yes _____ No

If yes, please list:

Is there any other physical or emotional condition of which we need to be aware?
Please explain.

In the event of an emergency, I give authority to the accompanying adults to authorize treatment. I understand that an attempt to notify me will be made before any treatment is authorized.

Parent /Guardian Signature

Date

PLEASE NOTIFY NANCY CROSBY AT **746-4911 x2211** IF THE INFORMATION ON THIS FORM CHANGES. All forms will be shredded after July 31, 2011.

**PARENT/GUARDIAN CONSENT FORM AND LIABILITY WAIVER
ELEMENTARY & YOUTH PROGRAMS 2010-2011**

PARISH Church of the Redeemer

PARTICIPANT'S NAME _____

Sex _____ **Date of Birth** _____

PARENT/GUARDIAN'S NAME _____

Home Address _____

City _____ **State** _____ **Zip** _____

Home # _____ **Work #** _____ **Cell #** _____

I, _____, grant permission for my child _____ to participate in religious education and youth ministry events at the parish from Aug. 1, 2010 - Aug. 31, 2011, including but not limited to formation classes and Vacation Bible School.

I understand that these events will take place under the guidance and direction of parish employees and/or volunteers. A separate form will be provided for off-site events.

As parent/legal guardian, I remain legally responsible for any personal action taken by my child. I agree to hold harmless Church of the Redeemer and the Diocese of Richmond as well as its officers, directors, agents, chaperons, or representatives associated with these events, arising from or in connection with my child attending the event, including but not limited to accidents, emergencies, or exposure to reckless conduct of persons.

PARENT/GUARDIAN SIGNATURE:

_____ **Date** _____

PHOTO RELEASE: Occasionally, photos of events may appear on the church website and/or in printed materials such as the parish newsletter. No identifying information will accompany the images.

I grant permission to Church of the Redeemer to photograph my child and use his/her picture, silhouette, or other reproductions of physical likeness in connection with publications (i.e. newsletters, website, brochures), videotapes or news releases of Church of the Redeemer.

_____ Yes _____ No

PARENT/GUARDIAN SIGNATURE:

_____ **Date** _____