

GCC Student Ministries Permission Slip, Liability and Medical Release Form

(Please fill one permission slip out for every event and activity that takes place away from the Church building and/or requires transportation. Thanks!)

Event: _____
Student's Name: _____
Birthday: ____/____/____
Parent/Guardian's Name: _____
Address: _____
Home Phone: _____ **Cell Phone:** _____

****Please fill out medical info indicated with an (*) directly below ONLY IF this is the first time you've filled out this form or if information has changed.**

*Health Insurance Company _____
*Policy # _____ *Known Allergies? _____
*List medications currently taken: _____

****Please initial, sign and date below for agreement to the info below EVERY TIME.**

_____ I, hereby, grant permission for my student to participate in an activity that requires transportation to a location away from the Church site. This activity will take place under the guidance and direction of the Youth Pastor/Youth Leaders/Chaperones of Greencastle Christian Church.

_____ As parent/legal guardian, I remain legally responsible for any personal actions taken by the above named young person ("participant"). I agree on behalf, my child named herein, or our heirs, successors, and assign, to harmless and defend (Greencastle Christian Church), its leaders, volunteers, Pastor and chaperones or representatives associated with the event with respect to any and all actions, claims or demands that may be made or brought against Greencastle Christian Church, arising from or in connection with my child's attending the event or in connection with any illness or injury or cost of medical treatment in connection there within.

_____ I do release and hereby agree to hold harmless Greencastle Christian Church from any and every claim arising, or which may be asserted by me or by any member of my family by reason of participating in any activities associated with events. I also release the lessor of properties on which the event is being held (either on Church grounds or away).

_____ Further, I give Greencastle Christian Church permission to use photo and video taken at the event.

_____ Further, I do certify that I am covered by adequate accident insurance. My consent is rewarded to those in charge if given below to handle emergencies by their judgement if contact with the student's parent/guardian(s) can't be made.

Signature of Parent/Guardian: _____

Date: ____/____/____