

Permission Form and Consent for Emergency Medical Treatment Grace Community Church

Name of child: _____ Sex: (circle) M / F Date of birth: _____

Destination: _____

Parent(s) or Legal Guardian(s):

Name(s): _____ and _____

Address: _____

Home phone: _____ Work: _____ Cell or other phone: _____

Alternate contact person(s) for emergencies

Name(s): _____

Address: _____

Home phone: _____ Work: _____

Cell or other phone: _____

Medical Information

Insurance Company: _____ Group # _____ ID# _____

Permission/Authorization

I (the undersigned) am the parent or legal guardian of the above named child. He/she has my permission to participate in the outing(s) or field trip(s) specified above. I authorize any of the adult teachers or advisors assisting in the field trip/outing to take any reasonable action to protect the safety, health and welfare of my child. In case of a medical emergency, I authorize any adult teacher or advisor to administer first aid treatment to my child and, if necessary in his or her judgment, obtain medical treatment (including surgery) for my child by any medical care provider. I also authorize the adult teacher or advisor obtaining such medical treatment for my child to give, on my behalf, any written consent for such medical treatment that is customarily required by the medical provider, including written consent that releases the medical provider from liability.

The following allergies, medications and other medical issues should be made known to teachers or providers of medical treatment:

I understand that my child is expected to behave in a respectful manner to other members of the group, as well as any persons he/she encounters during the trip. He/she will be expected to obey the adult teacher/advisor's requests with respect to safety and group needs. Failure to do so I understand I will be called and requested to come and pick up my child.

Signature of Parent or Guardian: _____ Date: _____

Official use: circle one – Paid / Not Paid

Check / Cash

Deposited _____ (initials)