

Medical Release Form
Loudon Avenue Christian Church (LACC)

Child's Name:

Date of Birth:

Parent/Guardian Name:

Parent/Guardian Name:

Home Phone:

Work/Cell Phone

Home Phone

Work/Cell Phone

Address

Address:

City, State, Zip Code

City, State, Zip Code

Alternate contact name and phone number if parents/guardians cannot be reached

Name: _____

Telephone: _____

1. Consent and Certification:

I certify that my child is physically fit and adequately trained to participate in all activities of this event including swimming, except as noted as follows: _____

The undersigned will complete a parental consent form for any event sponsored by Loudon Avenue Christian Church.

2. Medical Information:

Pediatrician/Primary Provider: Name: _____ Phone: _____

Hospital/Clinic preference: _____

List any medical conditions/**food/drug allergies**/dietary restriction, etc. _____

Medication Child takes: _____

Last Tetanus shot: _____

Insurance: Yes ___ No ___ If yes, Company name and policy number _____

I, the undersigned, being the parent or legal guardian of the above child, do hereby consent to the participation of church sponsored activities and understand:

1. That I am giving my permission for any and all medical attention necessary to be administered to my child in the event of accident, injury, sickness, etc., while they are under the care of LACC, until such time as I may be contacted.
2. If neither of the person(s) designated above can be contacted, I give permission to treatment of my child as may be required and determined by the appropriate health care professional who is present.
3. That this release is effective for one year from the date signed, unless updated/reviewed and dated on a yearly basis..

I give permission and will accept financial responsibility for my child to receive medication, and/or health procedures, and emergency medical care as needed.

Parent/Guardian Signature: _____

Print Name: _____ **Date:** _____

Date Reviewed/Initialed _____ Date Reviewed/Initialed _____ Date Reviewed/Initialed _____