

MEDICAL, LIABILITY, and MEDIA RELEASE FORM

For all Hyde Park Community UMC Middle School and High school Activities
Occurring between September 1st 2016 and August 31st, 2017

We ask for an updated form annually to make sure all information is current and accurate.

Please do not turn in until it completely filled out. Please print clearly.

Student Legal Name _____ Birthday ____ / ____ / ____ School _____

Address _____ City _____ State _____ Zip _____

Student Cell phone _____ Student E-mail _____

Parent/Guardian _____ Parent/Guardian Phone _____

Parent/Guardian Email _____

HEALTH HISTORY AND INFORMATION

For any of the below, list details. If there is not enough space use the back of the sheet.

Does student have allergies/restrictions (food, medicine, hay fever, etc.) _____

Does student have physical conditions (heart, asthma, diabetes, epilepsy etc.) _____

Name/dosage of all medications you are regularly taking: _____

Date of the last tetanus shot (should be less than 8 yrs. ago) _____

Permission to administer OTC medication (Tylenol, Tums, PeptoBismo, Dramamine, etc.) as needed: Yes _____ No _____

Primary Care Physician _____ Phone _____

Primary Care Dentist _____ Phone _____

Insurance Company: _____ Insurance Company Phone: _____

Insurance Policy number: _____ Name of the Insured _____

Parents or Guardian Signature Required below for all minors

Medical Release

This health history is complete and correct to the best of my knowledge. If we cannot be reached in the event of an emergency, I give my permission to the physician or dentist, selected by the church leadership to secure proper treatment, and/or order injection, anesthesia, or surgery for the minor listed on this form.

Photo/Media Release

I hereby give permission for the use of pictures or video/audio recordings of the minor listed on this form for the purposes of promoting and reporting Hyde Park Community UMC events without compensation to me or the minor. I agree all pictures and recordings remain property of Hyde Park Community UMC, and may be used in good taste on church website, print material, church worship presentations and/or Facebook posts.

Liability Release

Every activity by this church is carefully planned and supervised by adults. However, even with the best planning and precautions, unforeseen injuries and losses can occur. By signing this form, the parent or guardian agrees to assume and accept all risks and hazards inherent in church-related activities and off site trips. I also agree not to hold the church, its employees, or volunteers liable for damages, losses, or injuries of any kind to the person or property undersigned. I am signing voluntarily for the minor on this form and the signature is for medical, media, and liability release.

Signature of parent or legal Guardian _____ Relationship to Minor _____

Printed name of parent or legal Guardian _____ Date _____

Emergency phone # _____