

West End Presbyterian Church
Youth Permission and Medical Release Form
September 2019 - August 2020

Name of Youth: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Father/Guardian: _____ Home Phone: _____ Cell: _____

Mother/Guardian: _____ Home Phone: _____ Cell: _____

Emergency contact in case we are unable to reach you at the above numbers:

Name: _____ Relationship: _____ Phone: _____

Insurance Company: _____ Group & Policy Number: _____

Phone Number of Insurance Company: _____ Name of Insured: _____

Name of Physician: _____ City: _____ Phone Number: _____

Allergies: _____ Medications: _____

Tetanus shot within the last 5 years? _____ Are you being treated by a physician for any reason? _____

In case of an emergency, I understand that every effort will be made to contact me. If I cannot be reached, I hereby give the adult representatives of West End Presbyterian Church permission to act on my behalf in seeking medical treatment for my child in the event that such treatment is deemed necessary. I give permission to those administering emergency treatment to do so using those measures deemed necessary. I absolve West End Presbyterian Church and its adult representatives from any liability in acting on my behalf in this regard so long as the West End Presbyterian Church and the adult representatives are not grossly negligent.

Parent/Guardian Signature: _____ Date: _____

My child has my permission to attend church sponsored events scheduled throughout the year. The parent/guardian understands that the adult representatives of West End Presbyterian Church are responsible for maintaining order and administering discipline during the events in which your child is participating. Should a child, in the view of the adult representatives, become a chronic disciplinary problem, the parent /guardian will be notified and the child will be sent home at the expense of the parent or guardian.

Parent/Guardian Signature: _____ Date: _____

Photographic Release ~ West End Presbyterian Church

I hereby grant permission to West End Presbyterian Church and its respective licensees, successors and assigns, the right and permission, with respect to those photographs taken of me or the minor named below on whose behalf I am signing, and with respect to any printed matter in connection therewith, to do the following:

1. To include such photographs in all editions of all publications designed and printed for church use, in all media, Internet, and in the advertising, publicity, and promotion thereof.
2. To use my name, or the name of the minor on whose behalf I am signing, in connection with the foregoing.

I hereby release, discharge and agree to indemnify and hold harmless West End Presbyterian Church and its legal representatives, licensees, successors and assigns, from all claims and demands whatsoever arising out of or in connection with the foregoing, and waive any rights to inspect or approve the same.

I hereby certify that I am the parent and/or guardian of, _____,
(print youth's name)

a minor under the age of eighteen (18) years old, and hereby consent on behalf of said minor to the use of any of the photographs taken of said minor pursuant to the terms set forth in this Media Release Authorization, including, without limitation, the release, discharge and hold harmless provisions thereof.

Signature of Parent or Legal Guardian

Date

West End Presbyterian Youth Group Covenant

I will strive to serve God, pray and worship regularly.

I will support and encourage other youth and adults.

I will participate wholeheartedly in West End Presbyterian activities.

I will respect the feelings, opinions and property of others.

I will arrive on time and not leave early unless I talk to an adult leader in advance.

I will abide by dress codes wherever we go.

I will communicate with leaders if I plan on bringing a friend to an event.

I will abide by deadlines, lights out, rules of centers we visit and the decisions of leaders.

I will talk to an adult leader if I have a problem, need or concern.

I will abstain from the use of tobacco, alcohol, drugs and all types of sexual behavior.

I will abide by this covenant to the best of my ability.

I understand that my parents may be called and that I may be asked to leave an activity if I do not abide by this covenant.

Youth Signature: _____ Date: _____