

LAVEEN BAPTIST CHURCH

[Amplified Youth Ministries]

5036 W. Dobbins Road
Laveen, AZ 85339

Rev. Jerry Neal...Senior Pastor
Joshua Tompkins...Youth Minister

2009-2010 MEDICAL RELEASE AND PERMISSION FORM

Name of Student _____ Grade _____

BE IT KNOWN that, I, the undersigned parent or guardian of the student above named, do hereby give and grant unto any medical doctor or hospital my consent and authorization to render such aid, treatment or care to said student as in the judgment of said doctor or hospital, may be required, on an emergency basis, in the event said student should be injured or stricken ill while participating in a Laveen Baptist Church Youth Ministry-Sponsored ("Amplified Youth"-sponsored) activity. Also, I understand that as a participant, my child may be photographed or videotaped for display during some activities.

IT IS HEREBY understood the consent and authorization hereby given and granted are continuing, and are intended by me to extend throughout said student's involvement in Laveen Baptist Church Youth Ministries ("Amplified Youth"). IT IS FURTHER understood that any expense incurred will be paid for by insurance or the parent/ guardian of the student. Payment of the expense is not a church responsibility.

EMERGENCY CARE: If emergency service involving medical action or treatment is required and neither the parents or guardians can be contacted, I hereby consent for the student named above to be given medical care selected by Laveen Baptist Church.

Signature of Parent/Guardian

Today's Date

Student's DOB

Parent/Guardian Name: _____

Home Phone: (_____) _____ Address: _____

Insurance Co. & Policy # _____

Father' Business Phone: (_____) _____ Mother's Bus.Phone: (_____) _____

IN CASE OF EMERGENCY (If parent/guardian are not immediately available):

Friend/Relative: _____ Phone: (_____) _____

Friend/Relative: _____ Phone: (_____) _____

Friend/Relative: _____ Phone: (_____) _____

MEDICAL ALERT(S) (allergies, medications, etc) If none, write "NONE":

Medication(s): _____

Allergies: _____