

AMERICAN LUTHERAN CHURCH

Youth Parental Consent and Liability Release Form

PARTICIPANT'S NAME _____
AGE _____ BIRTH DATE _____
ADDRESS _____
PHONE _____
PARENT/GUARDIAN NAMES _____ / _____
PARENT/GUARDIAN CELL PHONE(S) _____ / _____
EMERGENCY CONTACT _____ / _____
(Name) (Cell Phone)

TO WHOM IT MAY CONCERN: The undersigned does hereby give permission for our (my) child _____ ("Participant"), to attend and participate in YOUTH MINISTRY EVENTS sponsored by American Lutheran Church.

LIABILITY RELEASE: In consideration of American Lutheran Church allowing the Participant to participate in youth ministry events, we (I), the undersigned, do hereby release, forever discharge and agree to hold harmless American Lutheran Church, its representatives, directors, employees, volunteers and agents (collectively herein the "Church") from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the Participant while involved in the youth ministry events.

We (I) the parent(s) or legal guardian(s) of this Participant hereby grant our (my) permission for the Participant to participate fully in youth ministry events, including trips away from the church premises.

Furthermore, we (I) [and on behalf of our (my) minor Participant(s)] hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved with youth ministry events therein. Further, authorization and permission is hereby given to said Church to furnish any necessary transportation (within the limitations of church insurance and the law), food and lodging for this Participant. The undersigned further hereby agree to hold harmless and indemnify said Church for any liability sustained by said Church as the result of the negligent, willful or intentional acts of said Participant, including expenses incurred attendant thereto.

EARLY RETURN HOME POLICY: Should it be necessary for our (my) child or youth to return home due to medical reasons, disciplinary action or otherwise, the undersigned shall assume all transportation costs and responsibility.

TRANSPORTATION PERMISSION: The undersigned does also hereby give permission for our (my) youth to ride in any vehicle driven by an approved ADULT chaperone while attending and participating in youth ministry events sponsored by American Lutheran Church. Our (my) child/youth and we (I) understand that SEAT BELTS SHALL BE WORN AT ALL TIMES during transportation and are responsible for compliance.

PHOTO RELEASE: The undersigned additionally gives permission for the church to publish photographs or video of our (my) child/youth on the church website, social media and in the church newsletter.

Parent/Guardian Signatures:

_____/_____
Date _____

Medical Insurance: YES _____ NO _____

Insurance Company: _____

Policy/Group ID#: _____

Hospital Preference _____

Pediatrician or Doctor _____/
(Name) (Phone)

Emergency Phone #s in case parent/guardian cannot be reached:

Name: _____

Relationship: _____

Phone: _____

Name: _____

Relationship: _____

Phone: _____

Allergies or Medical Conditions:

Other Dietary Considerations:

Any History of Serious Illness (diabetes, asthma, epilepsy, etc.) or recent hospitalizations:

What medications (if any) are presently being taken?

MEDICAL TREATMENT PERMISSION: We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child or youth pursuant to this authorization.

Parent/Guardian Signatures:

_____/_____
Date _____