

Medical Release Form

Student Ministry - Sagemont Church

This form will be kept on file for one year at which time a new form will need to be filled out.

PLEASE NOTE: Any changes in status during the year, ie: change of address, insurance, telephone requires a new form to be filled out. Thank you for your cooperation!

STUDENT INFORMATION

This information is for a (please circle only one):			Youth	Adult (18 or over)
First name:	Last name:	Full address w/ city & zip code:		
Age:	Date of birth:	Grade: (circle one) 6 th 7 th 8 th 9 th 10 th 11 th 12 th		
Parent / Guardian name:	Relationship to student:	Full address (if different):		
Home Phone:	Work Phone:	Cell Phone:		

MEDICAL HISTORY

<p style="text-align: center;">Circle any and all conditions that this student currently has or has had:</p> <p style="text-align: center;">Diabetes Heart Asthma Seizures Hypertension Bleeding Disorder Broken Bones Thyroid Kidney Epilepsy Other</p> <p>Specific Explanation:</p> <p>*Allergies (any and all):</p>

EMERGENCY AUTHORIZATION

Additional Contacts (name and relationship to student):		Insurance company, name of insured, & policy number:	
Daytime phone:	Evening phone:	Doctor's name:	Office phone:
Cell phone:		Dentist's name:	Office phone:
<p>We/I also authorize the staff of Sagemont Church to arrange medical transportation and care in the event of a medical emergency. I understand that in the event of a medical emergency, a representative of Sagemont Church will contact me immediately. I release and hold harmless Sagemont Church and its representatives from any claims or liability for authorizing medical care and transportation for my student.</p> <p>Signature of parent/guardian: _____ Print name: _____ Date: _____</p>			

PHOTO RELEASE

<p>We/I consent to and approve the use of video and photographs of my student for ministry purposes by Sagemont Church of Houston, Texas, with the understanding that such media use will not be identified with my student's name. I grant to Sagemont Church the perpetual rights to use and re-use such photographs for printed and/or electronic formats including but not limited to brochures, newsletters, closed content Facebook pages and website material.</p> <p>Signature of parent/guardian: _____ Print name: _____ Date: _____</p>
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