

CHRIST EPISCOPAL CHURCH

PERMISSION AND MEDICAL CONSENT THROUGH AUGUST 2019

As a parent or legal guardian, I hereby give permission for my child to participate in all activities, onsite and off-premises, organized by Christ Episcopal Church, Winchester, Virginia, that may also involve travel in private or public vehicles.

Child's Full Name: _____

Gender: _____ Date of Birth: _____

Parent/Guardian Name: _____

Home Address: _____

Home Phone: _____ Cell: _____

Emergency Contact: _____ Phone: _____

Relationship: _____

Address: _____

Allergies/Reactions

Insect Stings: _____

Ivy Poisoning: _____

Hay Fever: _____

Penicillin: _____

Other: _____

Dietary Restrictions: _____

Medications taking: _____

Date of last Tetanus shot: _____

Medical/Health problems or injuries, or chronic/recurring illnesses that would have an effect on participation in activities: _____

Activity limitations: _____

Family Physician: _____ Phone: _____

Address: _____

Family Dentist: _____ Phone: _____

Address: _____

Specialist: _____ Phone: _____

Address: _____

Medical Insurance Company: _____

Policy #: _____ Phone: _____

Dental Insurance Company: _____

Policy #: _____ Phone: _____

I understand that in the event that my child requires medical or dental treatment while engaged in a Church activity, reasonable efforts will be made to contact me; however, if I cannot be reached, I hereby give permission and consent to the Church's representative or other adult leader acting on behalf of the Church to authorize medical, dental, or diagnostic treatment (to include x-rays and surgery) as advised by appropriate medical authorities licensed to practice where the services are rendered. To the best of my knowledge I have listed all my child's allergies, medications, medical concerns, and other pertinent information.

This permission and medical consent will remain in force through August 31, 2018, unless revoked by me in writing.

My Child has my permission to participate in all activities except as noted above.

I understand that Christ Church will sometimes record images, sound or video of church events for use in marketing and promotional material, social media and on Web sites owned by Christ Church. Last names are not printed in conjunction with photos of youth.

If you do NOT want such images published of your child, please indicate by checking this box. ☐

Signature: _____ Date: _____