

FPC Parent/Guardian Medical/Liability Release

Consent to Emergency Medical Treatment for _____

In the event that a reasonable attempt to contact me at _____

[print name and telephone number] or _____ [other parent or guardian and telephone number] proves to be unsuccessful (or in the event that the medical emergency appears to those supervising this trip to require such immediate treatment that time spent trying to contact us would create a risk of harm to my child), I hereby authorize the adult supervisors to seek emergency medical treatment and I hereby authorize any licensed physician or dentist to provide emergency medical treatment at my expense for my child deemed reasonably necessary by the physician or dentist. [This authorization for the provision of emergency medical treatment does not cover major surgery unless either (1) a second licensed physician or dentist as the case may be first concurs in the necessity for such surgery prior to the performance of such surgery or (2) my child's life is threatened by the delay of such surgery.] I further authorize the transfer of my child to any hospital or other medical facility for emergency medical treatment.

I have the following medical insurance plan that covers treatment for my child:

Name of Insurance Company: _____

Insurance Plan Name: _____

Group Number (if a group policy): _____

Participant Account Number: _____

To assist any hospital or medical practitioner not having access to my child's medical history, I hereby provide the following information concerning my child, which may be released to any hospital or medical practitioner in conjunction with the seeking of emergency medical treatment:

Allergies: _____

Type, Dosage, and Frequency of Medication Being Taken: _____

Date of Last Tetanus Shot: _____

Known Physical Impairments: _____

Other Medically Important Information: _____

Release from Liability

In consideration of the willingness of Faith Presbyterian Church to allow my child to participate in youth group activities, on behalf of my child I hereby release Faith Presbyterian Church and its respective directors, officers, agents, employees, members, and assisting adults from any and all actions, causes of action, damages, claims or demands which I, my child or my child's heirs, executors, administrators, guardians or assigns may ever have against Faith Presbyterian Church except for claims of gross negligence or intentionally wrongful conduct.

I, the undersigned, have read this instrument, understand all of its provisions, and execute it voluntarily and with full knowledge of its significance.

(Parent or Guardian)

Date Signed