

# Youth Ministry Medical Authorization Form

August, 2010 – August, 2011

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Medication Taken: \_\_\_\_\_

Allergies/Allergic Reactions: \_\_\_\_\_

Other Pertinent Health Information: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Insurance Co.: \_\_\_\_\_ Policy #: \_\_\_\_\_

Dentist Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Dental Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

Last Dates of Immunizations: Tetanus: \_\_\_\_\_ Polio: \_\_\_\_\_ Measles: \_\_\_\_\_

Parent/Guardian Names: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I, the undersigned parent or guardian, hereby authorize emergency medical, dental, health or hospital services be rendered to my child upon consent of a Third Presbyterian Church staff member or designated advisor.

The purpose of this authorization is to permit my child to receive emergency medical attention when needed while involved in activities connected with Third Presbyterian Church's Youth Groups when I or my emergency contact are unavailable to give such consent.

This authorization shall be effective for the 2010-2011 school year.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**YOUTH MINISTRY**  
**PARENTAL RELEASE & CONSENT FORM**  
August, 2010-August, 2011

We (I), the undersigned parent(s) or guardian(s) of \_\_\_\_\_ do hereby authorize her/him to participate in the Third Presbyterian Church Youth Ministry program for the 2010-2011 school year.

It is understood that designated advisors will be in attendance at each church-sponsored event and provide reasonable supervision to ensure the health, welfare, and comfort of all in attendance.

We (I) hereby release Third Presbyterian Church from any liability for any incident beyond the control of advisors and staff, using their due diligence and best judgment.

We (I) realize that pictures of youth activities are sometimes posted on the church website (without names) and in the church newsletter, to share with others and to promote Third Presbyterian Church Youth Ministries, as we continue our outreach to young people in our community.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**YOUTH COVENANT**

I promise to do my best to make all youth activities which I attend at Third Presbyterian Church fun filled, faith-filled, and welcoming and inviting to ALL!

I will be caring and respectful of others, as well as of their property, and will listen to others; views with consideration, even when they differ from my own, so that everyone might experience Christ's love fro them.

I will not bring or use any alcohol, tobacco, or illegal drugs during any youth program or event.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date