

Parental Consent Form

Name: _____ Age: _____ Birth date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Emergency Phone: _____

Parent(s) business phone: _____ Parent(s) email: _____

School Grade in or just completed: _____

To whom it may concern:

The undersigned does hereby give permission for our (my) child, _____, to attend and participate in activities sponsored by Carnation Bible Church for the period between January 1, 2010 and December 31, 2010. *A photocopy of this authorization carries the same force and authority as the original.*

I voluntarily waive any claim against Carnation Bible Church, church personnel, or other person(s) transporting my child, against all liability, claims, damages, attorney fees, and expenses arising out of or in connection with any activities of Carnation Bible Church.

I further authorize the church to use photos or videos taken of my child at Carnation Bible Church for advertising including print media for church brochures, articles, and the church website. At no time will church photos be used by unrelated organizations. Yes No

We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any 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, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital,

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 pursuant to this authorization. Should it be necessary for our (my) child to return home due to medical reasons or otherwise, the undersigned shall assume all transportation costs. The undersigned does also hereby grant permission for our (my) child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by Carnation Bible Church.

Hospital Insurance: Yes No

Name & Policy Number of Medical Insurance

Father (or legal guardian) Date Mother (or legal guardian) Date

PLEASE LIST ANY HEALTH OR MEDICAL INFORMATION OF WHICH PERSONS CARING FOR THIS MINOR SHOULD BE AWARE. (Please be specific i.e., allergies, prescription medication):

