

MEDICAL/LIABILITY RELEASE FORM

PLEASE PRINT:

Name of Minor / Participant: _____

Address: _____
Number/Street City / State / Zip

Age: _____ Birth Date: _____ Grade: _____ Today's Date: _____

1. To assure the safety and health of the aforementioned minor. We (I), being 18 years of age or older, do hereby authorize any x-ray, examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care, required by said minor, when the need for such treatment is immediate, and when efforts to contact me/us are unsuccessful. We (I) hereby assume all risk of personal injury, sickness, death, and damage as a result of participation in recreation and work activities involved therein. We (I) shall be liable and agree to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization. This authorization is given pursuant to Section 25.8 of the Civil Code of California and shall remain in effect until the end of the calendar year (Dec. 31).

2. Medical Insurance Co.: _____ Policy #: _____

Physician: _____ Physician's phone #: (____) _____

3. In case of an emergency, contact: (other than parent or guardian)

Name: _____ Phone #: (____) _____ Relationship: _____

Name: _____ Phone #: (____) _____ Relationship: _____

4. List any physical disabilities or allergies, which we may need to be aware of:

5. List any special medication, which your son/daughter uses:

6. We (I), being 18 years of age or older, do hereby release, forever discharge and agree to hold Palm Canyon Community Church and the directors thereof free from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and/or child-participant while the said person is participating in a church trip or activity. We (I) also agree to hold harmless and indemnify said church, it's directors, employees and agents, for any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant.

7. Authorization and permission is hereby given to said church to furnish any necessary transportation, food, and lodging for this participant.

Father's signature (or participant - of legal age)

Mother's signature (or legal guardian)

Day Phone #: (____) _____

Night Phone #: (____) _____

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