

NFOCUS ALL-PURPOSE RELEASE FORM

In consideration for being accepted by THE FIRST BAPTIST CHURCH OF CLARE for participation in NFOCUS YOUTH ACTIVITIES, we (I), being 21 years of age or older, do for ourselves (myself) (and for and on behalf of my child-participant if said child is not 19 years of age or older) release authorization and permission for said church to furnish any necessary transportation, food, and lodging for this participant.

(If the participant has not attained the age of 19 years): We (I) are the parent(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him (her) to participate fully in NFOCUS YOUTH ACTIVITIES, and hereby give our (my) permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment.

Further, should it be necessary for the participant to return home due to disciplinary action or otherwise, we (I) hereby assume all transportation costs.

Name of participant

Parent(s) Names

Parent(s) telephone

Hospital Insurance yes no
Insurance Co. _____

Policy number _____

Physician Name _____

Physician's phone _____

Emergency Contact _____

Emergency phone # _____

If under 19, both parents must sign unless parents are separated or divorced in which case the custodial parent must sign.)

Father Date

Mother Date

Legal guardian Date

Participant, if age 19 Date

Allergies _____

Medical Problems _____

PARTICIPANT ONLY

I have read the foregoing and understand the rules of conduct for participants and will abide by them as well as the directions of the leadership of the group.

Participant

This document will be kept on file and a copy will be transported along with the teens during our events. Please realize that by not signing this form, your child may not be able to participate with us on road trips and/or certain activities. Form is effective from September 1, 2014-August 31, 2015.