

2020 Summer Grove Student Ministry Medical Release



Please PRINT in DARK INK. Do not leave anything blank!

We cannot assume that a blank space means "none", please write "none".

Forms with missing information will be returned for completion.



YOUTH PARTICIPANT INFORMATION

First Name: _____

Last Name: _____

Birthdate: (MM/DD/YYYY) _____ / _____ / _____

Male

Female

Address: _____

City: _____ Zip: _____

Participant's Email: _____

Participant's Cell Phone: _____

Home Phone: _____

School: _____ Grade: _____

PARENT/GUARDIAN CONTACT INFORMATION

Name: _____

Relationship: _____

Cell Phone: _____

Work Phone: _____

Email: _____

MEDICAL INFORMATION

Recent serious injuries: No Yes

Recent surgeries: No Yes

Allergies to Medications: No Yes

Chronic medical Conditions: No Yes

Other Pertinent Health Concerns: No Yes

Medications taken regularly: _____

Medications taken occasionally for headaches, etc.: _____

Will you bring these medications with you? No Yes

SURGICAL WAIVER/MEDICAL INSURANCE INFORMATION

Do you have medical insurance? No Yes

If yes, attach a copy of BOTH sides of your insurance card to this form.

I, _____, parent and/or legal guardian of _____, a minor, hereby acknowledge that said minor is presently under my care, custody, and control. I hereby give my child, the said minor, my express permission to attend Summer Grove Baptist Church student events and participate in all activities during said events. (except as noted)

I have listed on this form said child's physical conditions or medical problems that may need attention, and all medications regularly used by said minor. I understand that all medical information will be kept confidential and will only be released on a need to know basis for care of said minor. In the event there arises an emergency necessitating medical or surgical attention, I hereby consent and give my permission to Summer Grove Baptist Church, or its representatives, or the sponsors, or any attending physician to make such decisions and to perform such medical treatments and/or surgery upon said child which may, in their sole discretion, be necessary and proper under the circumstances. I consent and give permission for said child, at his/her own discretion, to participate in counseling sessions with Summer Grove Baptist Church staff or volunteers, as they choose.

I release, acquit, discharge, and covenant to hold harmless Summer Grove Baptist Church or its representatives, sponsors, or the camps/hotels/campuses where the youth events are being conducted, from any and all actions, damages, or liabilities arising out of the treatment of any sickness or accident incurred by said child. I understand that at some church functions my child may ride in a private vehicle. Some activities have only one adult present. (Signing this waiver releases your student or child to participate in these and other activities with full knowledge that there may not be two adults present at all times.)

I also give authority and permission to Summer Grove Baptist Church staff to inspect my child's room and belongings while attending SGBC student events for the safety and protection of all participants if unusual circumstances make such an inspection necessary.

This form also serves as a release for my child to appear in Summer Grove Baptist Church photographs and/or videos for the purposes of publicity, training, etc.

Parent's Initials I will inform SGBC as to any changes in the information provided on this form.

X _____
Parent/Guardian Signature (if under 18) Date

X _____
Student Signature Date

Please read the rules and sign the contract on the back of this form.

2020 Summer Grove Student Ministry Rules and Contract

Please initial beside each of the following rules indicating you understand what is expected of each participant.

- | | | |
|--------------------|-------------------|---|
| Parent
Initials | Youth
Initials | 1. Students are not allowed to leave the SGBC group while attending a student ministry event. |
| Parent
Initials | Youth
Initials | 2. Students must attend ALL scheduled activities, including Bible study sessions, share times, recreation, meals, & worship times, unless excused by a sponsor. |
| Parent
Initials | Youth
Initials | 3. Students who are ill or injured must be with a sponsor. |
| Parent
Initials | Youth
Initials | 4. Students must indicate what medications they will use during SGBC events on the other side of this Permission/Medical Release Form. Students are not allowed to share any medication with any other student. |
| Parent
Initials | Youth
Initials | 5. Students MUST be in their assigned rooms and lights out by the designated time. |
| Parent
Initials | Youth
Initials | 6. Drugs, alcohol, any form of tobacco, any type of paint, firearms, knives, or any other kind of weapon, or fireworks are NOT allowed. These items can be destructive to you, to others, and/or to property. ALSO, DO NOT BRING any form of pornography, televisions, computers, or any other type of electronic games or equipment. |
| Parent
Initials | Youth
Initials | 7. Clothing at any event needs to be appropriate for the climate and time of year that we are having the event.
Casual clothing is acceptable during all activities. Gaping sleeveless shirts/dresses (that expose undergarments, or chest), will not be allowed. Shorts and skirts need to be a modest length and not revealing of undergarments, etc. Low cut necklines, sheer clothing, or clothes with inappropriate slogans/logos are not to be worn. Persons (guys or girls) wearing clothing determined to be too short or too revealing may be discreetly asked to change. |

We do not want clothing to be a major focus, and we certainly do not want to be the clothing police. These guidelines are an effort to keep our focus completely on Jesus, and not to bring unnecessary focus on our own bodies. This enables us to completely focus on what God is doing in our lives during these activities.

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|--------------------|-------------------|--|
| Parent
Initials | Youth
Initials | 8. Students are to respect adult sponsors and follow their instructions. |
| Parent
Initials | Youth
Initials | 9. Students must wear name tags provided (at camps, retreats, etc.) at SGBC student events at all times. Your name tag shows you are authorized to participate in the event. |
| Parent
Initials | Youth
Initials | 10. Refrain from Public Displays of Affection (PDA) with girls or boys. |
| Parent
Initials | Youth
Initials | 11. Under NO circumstances are girls to be in boys' rooms or boys in girls' rooms. This includes hallways outside rooms, too. NO EXCEPTIONS! |
| Parent
Initials | Youth
Initials | 12. Student must obey rules and regulations of host locations (camps, host homes, etc.) |

I sign this contract committing myself to participate in every activity of the SGBC student events I attend. I understand that if I fail to use good judgment and common sense in following the rules listed above, I will be dismissed and returned home at my own/parents' expense.

I have read all the rules above, I understand them, and agree to abide by them.

Participant's Signature

Date

I have read the above rules and understand that my son/daughter may be dismissed from SGBC student events and sent home at my expense if he/she does not adhere to the rules agreed to.

Parent/Guardian Signature (if under 18)

Date