



2011 - 2012 Medical Release / Permission Form*

Last Name: _____ First Name: _____ Gender: _____

Date of Birth: _____ School: _____ Grade: _____

Parents or Guardian: (First + Last) _____ T-Shirt Size _____ Youth S, M, L, XL
Adult S, M, L, XL

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Parent's E-mail Address: 1. _____

2. _____

Emergency contact other than Parent or Guardian: _____

Relationship to Participant: _____ Home Phone: _____

Work Phone: _____ Cell: _____

Participant's Physician: _____ Office Phone: _____

Please explain any medical conditions, allergies, or special needs in the space provided below and continue on the back.

Health Insurance Company: _____ Insurance Phone Number: _____

Policy Number: _____ Name of Insured: _____

***Copy of Insurance Card provided / attached? Yes _____ No _____**

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I, \_\_\_\_\_ (parent or guardian), give permission for my son/daughter

\_\_\_\_\_ (child's name) to participate in outings / activities sponsored by the

Student, Music, Preschool, or Children's Ministries of Hermitage Hills Baptist Church. Should emergency medical

treatment be necessary and I am unable to be contacted, I authorize accompanying adult sponsors to act on my behalf

and approve medical treatment. I hereby grant permission for an attending physician or hospital to administer medical

care, if deemed necessary by the chaperones of ministries listed above. I also hereby release from any liability

Hermitage Hills Baptist Church, any and all adult sponsors or church staff in the event of any accident in route, during,

returning from any events sponsored by the ministries mentioned above. I understand that this medical release /

permission form is only valid from September 1, 2011 thru September 1, 2012.

**\*Should any information change before the expiration date, it is my responsibility to complete an updated form.**

**Please sign here *in the presence of a Notary.*** \_\_\_\_\_

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Information below is to be filled in by Notary:

_____ personally appeared before me, and in my presence

executed this within and foregoing permission and release form.

Witness my hand and official seal this _____ day of _____, 20____

My commission expires _____.

Notary Public _____