

# Medical Release Form 2011

First United Methodist Church  
202 Butternut  
Abilene, TX 79602

My son/daughter/ward, \_\_\_\_\_, has my permission to attend and participate in any said event of First United Methodist Church, Abilene, Texas. In the event of a medical emergency and I can not be reached by phone, the adult sponsorship of the event has my permission to secure the services of licensed medical professionals to provide the health care necessary, including anesthesia, for my child/ward. I understand that I will be responsible for any and all cost incurred in providing this treatment.

**SIGNATURE OF PARENT/GUARDIAN:** \_\_\_\_\_

**Phone#:** \_\_\_\_\_ **Alternate Phone #** \_\_\_\_\_

In the event that I cannot be reached by telephone at the above numbers, please call:

**Name:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

Please provide the following information concerning your child/ward:

**Allergies:** \_\_\_\_\_

**Special Medications:** \_\_\_\_\_

(Please send meds in prescription container labeled with instructions & content.)

**Doctor's Name:** \_\_\_\_\_

**Doctor's Phone #:** \_\_\_\_\_

**Special Dietary Requirements:** \_\_\_\_\_

Any other concerning health problems or physical handicaps that might affect Participation: \_\_\_\_\_

**Medical Insurance Provider:** \_\_\_\_\_

**Insurance Policy Number:** \_\_\_\_\_

I, \_\_\_\_\_ agree to participate fully in the activities of the group during the said functions of First United Methodist Church. I realize that my words and actions are a direct reflection of my faith in Jesus Christ and I agree to speak and to behave in a manner that would make that faith evident to others in our group and to those that God places in my path. I know that should I deviate from this agreement to the extent that my actions interfere with the experience that God desires for the group, I can be returned home at my parent's expense. Further, I (We) grant full permission to any and all of the forgoing to use my name, my voice, and/or my picture in any broadcast, telecast, web cast, publication, website, advertising, promotion, or any other church related event for any purpose.

**Participant's Signature:** \_\_\_\_\_

**Parent Witness:** \_\_\_\_\_