

Karns Church of Christ  
**Student Ministry Consent and Release 2018**

**DETAILS**

This form is valid for every event hosted by the Karns Church of Christ beginning January 2018.

Please print in ink and SIGN this form (you and child) before you turn it in.

**STUDENT INFORMATION**

Full Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_  Male  Female Email: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Child's cell: \_\_\_\_\_

T-shirt Size (Adult sizes only) \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_ Phone \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_ Phone \_\_\_\_\_

Emergency contact other than parent: Name \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Family Insurance Company \_\_\_\_\_ Policy# \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

List Allergies and/or medication currently taking \_\_\_\_\_

Date of last tetanus shot \_\_\_\_\_

List any medical conditions and precautions we need to take \_\_\_\_\_

**MEDICAL CONSENT AND RELEASE**

Please read the following and sign below:

1. I/we, as the parents/guardians, of the above named student, hereby give this child permission for him/her to travel and participate in all activities with the Karns Church of Christ during the 2018 calendar year.
2. I/we hereby authorize Justin Morton and David Baldwin to make emergency medical decisions in the event we cannot be reached.
3. I/we hereby authorize my/our child to be given minor first aid or over-the-counter medication as needed and as directed on the label, to treat non-emergency medical conditions that do not require a doctor or hospital visit such as a minor headache, stomachache, or allergic reaction (i.e. Tylenol, Advil, antacids, Benadryl) while at this event.
4. I/we hereby grant permission for an attending physician or hospital to perform whatever care is deemed necessary for the welfare of my/our child until I/we are able to be reached personally. In the event treatment is required from a physician and/or hospital personnel designated by the Church, I/we agree to hold the designees listed above and the church free and harmless of any claims, demands, or suits for damages arising from the giving of such consent.

5. I/we also hereby release, absolve, indemnify, hold harmless, and forever discharge the church, elders, ministers, deacons, organizers, volunteers, chaperones, and supervisors from any and all claims, demands, actions, or cause of actions present, past or future arising out of injury or damage while participating in this event.
6. I/we assume all risks and hazards incidental to the conduct and activities and transportation to and from the area specified. In case of injury to my/our child, I/we hereby waive all claims against the church, elders, ministers, deacons, organizers, volunteers, chaperones, and supervisors. I/we also acknowledge that I/we will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider or if I/we do not carry any health insurance.
7. I/we do hereby acknowledge that the information above is correct and current in order for the church to obtain medical attention in case of sickness or injury to my/our child. I/we also agree to notify Justin Morton immediately of any

\_\_\_\_\_ (Parent/Guardian)

\_\_\_\_\_ (Parent/Guardian)

## PHOTO AND VIDEO RELEASE

I/we hereby assign and grant to the Karns Church of Christ permission to use and publish the photographs and video recordings taken of my/our child during this event for use in the Karns Church of Christ printed publications, audio/visual media, social media and the church website. I/we hereby release the Karns Church of Christ from any and all liability from such use and publication. By signing below, I/we acknowledge I/we have read and understand all information about the Photo and Video release statement.

\_\_\_\_\_ (Parent/Guardian)

\_\_\_\_\_ (Parent/Guardian)

## STUDENT AGREEMENT

For your information, we expect each student to conform to these rules of conduct

Christ-like attitude at all times. No offensive or immodest clothing

No possession or use of alcohol, drugs, or tobacco. No fighting, weapons, fireworks, lighters, or explosives

No students can drive without pre-approved permission.

No students can ride with any person other than the chaperones without pre-approved permission.

Participation with the group is expected

Respect one another, staff, and adult leaders. Respect and comply with event schedules and rules. Respect property.

Students who fail to comply with these expectations may be sent home at their parents' expense.

I, the student, have read the rules of conduct, the above evaluation of my health, and permission to participate in youth group activities. I agree to abide by the stated personal limitations and code of conduct.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit in writing any changes that occur in your health insurance policy.**

Karns Church of Christ

C/O Justin Morton

Office: 865.691.7411

Email: [Justin.morton@karnscoc.org](mailto:Justin.morton@karnscoc.org)