

Youth Trip Release Form
Effective for all trips and/ or activities with
THE CHURCH OF CHRIST AT CHAMPIONS.

I, the undersigned, attest and warrant that I am the parent, guardian, or managing conservator of (child's name) _____, and that I have legal authority to sign this permission, release and consent to medical treatment. I will keep informed of the church sponsored activities for my child. If I do not want my child to accompany the group and participate in any specific church sponsored activity, I will take sole responsibility to see that my child does not attend the activity.

Child's Name: _____ **Phone #:** _____ **Cell #:** _____
Address: _____ **Zip:** _____
Birthday: _____ **Parent or Guardian's Name:** _____

Medical Information

Physician's Name and Phone #	Drug Allergies	Current Medications
	Blood Type	

List all other pertinent Medical Problems: _____

Emergency Contact

In Case of Emergency, Contact:

Name: _____
Home Phone #: _____ **Business Phone #:** _____ **Cell #:** _____

Medical Insurance Information

Policy Holder: _____
Company's Name and Number: _____
Policy Number: _____

Medical Release

In the event of an emergency, I hereby authorize The Church of Christ at Champions ("Champions") and its staff, employees, drivers, sponsors, volunteers and helpers (collectively "Representatives") to take any steps they deem necessary to obtain emergency medical care, including without limitation, anesthesia, for my child and I hereby release Champions and its Representatives from any financial liability incurred during such emergency treatment.

Signed: _____ **Date:** _____
(Parent or Guardian)

Parental Consent

I hereby authorize and give my consent for my child to participate in Champions sponsored trips and activities on and off the premises of Champions and to ride in any vehicle provided by Champions or owned by private individuals. I also understand that if my child becomes unmanageable or a discipline problem, Champions may send them home immediately at my expense and I will forfeit any money paid for my child's participation in that event.

Signed: _____ **Date:** _____
(Parent or Guardian)

Photograph Release

Activities sponsored by Champions are often photographed and/or videotaped. As parent or guardian, I give my permission for my child, _____, to be photographed and/or videotaped with the understanding that the photographs/video may be used for such purposes as scrap books, video presentation, publicity, etc. by Champions and its Representatives.

Signed: _____ Date: _____
(Parent or Guardian)

Church Release

I hereby release Champions and its Representatives from any liability for injury or damages suffered by the above child and agree to release, indemnify and waive any rights by subrogation I may have, and hold harmless Champions and its Representatives for claimed or asserted injury or damage to my child.

Signed: _____ Date: _____
(Parent or Guardian)