

**REDEEMER COVENANT CHURCH
RELEASE AUTHORIZATION and MEDICAL/DENTAL FORM**

STUDENT NAME _____ Male/Female _____

Address _____ Zip _____ Phone _____

School _____ Grade _____ Birthday _____ / _____ / _____

PARENT'S NAMES _____

Father work phone _____ Mother work phone _____

Father cell phone _____ Mother cell phone _____

MEDICAL INFORMATION

Family Physician _____ Phone _____

Address _____ Zip _____

Allergies _____

Presently taking the following medication _____

Reason for taking medication _____

Medical Insurance Co. _____ Policy # _____

Family Dentist _____ Phone _____

Dental Insurance Co. _____ Policy # _____

In case of emergency, I hereby give permission to the physician or dentist selected by a representative of Redeemer Covenant Church to arrange for medical/dental care and to give oral or written consent in my behalf for medical treatment by a licensed physician or dentist.

By my signature below, I authorize my child to participate in all RCC activities for the time period shown below during any and all Student Ministry programs. Activities may include, but are not limited to: cookouts, swimming, basketball, kickball, dodge ball, roller skating, inline skating, games in the park, soccer, broom ball, ice skating, volleyball, baseball, football, camping, hiking, biking, concerts, Bible studies, golf, miniature golf, hayrides, horseback riding, rock climbing, tennis, racquetball, softball, and coffee drinking. These activities may occur both on campus and off campus.

PARENT SIGNATURE _____ **DATE** _____

In consideration of my child, _____ (print), participating in any and all events sponsored or under the direction of Redeemer Covenant Church or its employees, Council, staff, or their assisting agents, from July 2008 through August 2009, the undersigned hereby for myself and my heirs and executors, waive, release and forever discharge Redeemer Covenant Church and its employees from all claims and demands, rights and causes of action of any kind, now or hereafter, the undersigned may have, on account of or in any way growing out of any personal injury or damage resulting from our child's participation in such events. This release shall cover all events regardless of location.

PARENT OR GUARDIAN

DATE

WITNESS

DATE