



7201 Moundville Lane
Tuscaloosa, AL 35405
(205) 758-0868

Children & Student Ministry Release Form

This form will remain on file in the church office until my child reaches the age of 19. By signing this form, I know that I am responsible for notifying the Children or Youth Minister of any changes to any of this information. An annual renewal will be required and will be facilitated by church staff.

Medical Release Form & Permission to Treat

Personal Information:

Name: _____

DOB: ____/____/____ Age: ____ Gender: ____

Address: _____

City: _____ State: _____ Zip: _____

Emergency Contact Information:

Parent/Guardian: _____

Home Phone: (____) _____ Work Phone: (____) _____

Secondary Contact: _____ Relationship: _____

Home Phone: (____) _____ Work Phone: (____) _____

Insurance Information: *Attach a copy of your insurance card to this form.

Insurance Co.: _____ Group#: _____ Policy#: _____

Cardholder: _____ Relationship to Cardholder: _____

Insurance Co. Address: _____

Insurance Co. Phone: (____) _____

Personal Medical Information:

Physician's Name: _____ Phone: (____) _____

Physical Limitations (*Asthma, diabetes, allergies, etc.*), and/or **Special Instructions** (*Allergic to certain meds, rare blood type, wears contact lenses, etc.*)

List ALL medication taken on a regular basis and/or any that you would need to bring on a trip. (*Prescription meds MUST have a pharmacy label and name of doctor.*)

List all operations/serious injuries and dates within the past five (5) years:

The Health History is correct so far as I know, and the person herein described has permission to engage in all prescribed activities except as noted.

Emergency Authorization - I hereby give permission to medical personnel selected by the participant's Church sponsor/his designee or camp staff to order X-rays, routine tests, and treatment for myself. In the event of an emergency and neither my primary contact nor secondary can be reached, I hereby give permission to the physician selected by the Authorized Agent to hospitalize, secure proper treatment, order injections and/or anesthesia and/or surgery to myself as named above.

I further authorize the release of the above medical information to appropriate medical personnel and/or the health coverage insurance company. In addition, I have, and do hereby, release the church, its employees or agents from liability associated with participation in a church activity.

I understand that if I do not have medical insurance, I, as the parent or guardian, will be responsible for any medical expenses in the event of a sickness and/or injury. I understand that there are risks involved in taking place in recreation activities and other activities related to participation in youth functions.

Signature of Parent/Guardian _____ Date _____

Permission to Participate in Activities

This permission form will apply to all Children & Student Ministry Activities conducted during the time that my child enters the Children’s Ministry until they reach the age of 19. This form gives permission for my child to participate in any off campus church-sponsored activity or trip. Some trips will require additional permission and release forms.

I give permission for my son/daughter, _____, to participate in any Taylorville Baptist Church Children or Student Ministry sponsored activity. My son/daughter and I understand that the parents/members chaperoning are in charge and my son/daughter will follow all rules set for this activity. I will not hold Taylorville Baptist Church or any chaperone liable in the event that my son/daughter is injured during the activity.

Signature of Parent/Guardian _____ Date _____

Signature of Child/Youth Participant _____ Date _____

Photo Permission

I hereby release Taylorville Baptist Church to publish the photographs taken of me and/or the undersigned minor children, and our names, for use in Taylorville Baptist Church’s printed publications and website.

I release Taylorville Baptist Church from any expectation of confidentiality for my child and myself and attest that I am the parent or legal guardian of the child listed on this form and that I have the authority to authorize Taylorville Baptist Church to use photographs and names.

I acknowledge that since participation in publications and websites produced by Taylorville Baptist Church is voluntary, neither the minor child nor I will receive financial compensation.

I further agree that participation in any publication and website produced by Taylorville Baptist Church confers no right of ownership whatsoever. I release Taylorville Baptist Church, its officers, trustees, and its employees from liability for any claims by me or any third party in connection with my participation or the undersigned minor child.

Signature of Parent/Guardian _____ Date _____

Bus Permission

I hereby release Taylorville Baptist Church, its staff, bus driver, and trip sponsors from liability in case of an accident while my child is in transit to, while attending, or returning from any ministry event sponsored by the church. I do further agree that I will not hold Taylorville Baptist Church, trip or event sponsors, bus driver, or leader liable for any injuries or illnesses sustained during the trip or event.

I also understand that it is Taylorville Baptist Church policy for all passengers to wear seatbelts, regardless of age, while riding or driving the church bus and my child will abide by this policy.

Signature of Parent/Guardian _____ Date _____

The following must be completed by the Notary Public witnessing the above parent/guardian signatures.

The State of Alabama the County of Tuscaloosa

Before me, a Notary Public, on this day personally appeared _____ known to me (or proved to me on the oath of _____) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purpose and consideration therein expressed.

Given under my hand and the seal of the office this _____ day of _____, A.D. _____

Notary Public, Signature _____

My commission expires on _____ day of _____, A.D. _____.