

Greater Baltimore Church of Christ

# Permission, Release, Waiver of Liability, Medical Info, and Indemnity Agreement

Child/Youth name: \_\_\_\_\_  
(Last) (First) (M.I.)

Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent(s)/Custodial Adult(s)' Name(s): \_\_\_\_\_

Parent(s)/Custodial Adult(s) Phone numbers - Work ph: \_\_\_\_\_ Cell ph: \_\_\_\_\_

### In case of emergency contact:

1) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Daytime ph: \_\_\_\_\_ Evening ph: \_\_\_\_\_

2) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Daytime ph: \_\_\_\_\_ Evening ph: \_\_\_\_\_

## Authorization to Obtain Urgent or Emergency Medical Care

As the parent(s) or custodial adult(s) of \_\_\_\_\_ (child/youth's name), I/we give permission for Greater Baltimore Church of Christ, its agents, staff, and volunteers to obtain urgent or emergency medical care for my/our child, and I/we authorize health care providers to render such care as may be necessary. It is understood that reasonable efforts will be made to contact me/us prior to obtaining such care, but I/we authorize such care whether I/we are contacted or not, and I/we agree to be financially responsible for such care.

\_\_\_\_\_  
Parent/Custodial Adult Signature For Urgent or Emergency Medical Care Release

Name of Physician: \_\_\_\_\_ Phone: \_\_\_\_\_ Medical Insurance Co.: \_\_\_\_\_

Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_ Phone: \_\_\_\_\_

Health History ~ (the following information must be completed by the parent/ guardian)

Allergies - list all known and describe how reaction is managed

Medication allergies \_\_\_\_\_

Food allergies \_\_\_\_\_

Other allergies \_\_\_\_\_

### Please list current Medications

Med # 1 \_\_\_\_\_ Med # 2 \_\_\_\_\_

Med # 3 \_\_\_\_\_ Med # 4 \_\_\_\_\_

## Permission to Participate; Release, Waiver of Liability, and Indemnity Agreement

I/we give permission for \_\_\_\_\_ (name of child/youth) to participate in the activities of Greater Baltimore Church of Christ, both on the church premises and elsewhere. In consideration of the opportunity of my/our child/youth to participate in the activities of Greater Baltimore Church of Christ, I/we release Greater Baltimore Church of Christ, its officers, agents, employees, staff, and volunteers from any and all liability of any kind whatsoever for any loss or injury to my/our child/youth arising from my/our child/youth's participation in the activities of Greater Baltimore Church of Christ; and I/we agree to indemnify and hold forever harmless the Greater Baltimore Church of Christ, its officers, agents, employees, staff, and volunteers from any and all liability of any kind whatsoever for loss or injury to my/our child/youth arising from activities on or off the premises of Greater Baltimore Church of Christ or resulting from traveling to or from the activities of Greater Baltimore Church of Christ, including loss or injury resulting from negligence or gross negligence. I/we understand and agree that this permission and agreement shall remain in effect until revoked in writing by me/us, and I/we understand and agree that it is my/our responsibility to update our child/youth's medical and insurance information as changes occur.

\_\_\_\_\_  
Parent/Custodial Adult Signature for Permission to Participate, Release, Waiver of Liability & Indemnity Agreement