

**Christ Church
2021/2022 Student Ministries
Medical & Liability Release Form**

STUDENT'S NAME _____ SEX _____ AGE _____
D.O.B. _____ NAME OF PARENT/GUARDIAN _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
HOME PHONE _____ WORK PHONE _____

Please list the name of the nearest relative/friend to be contacted in an emergency.

Name _____ Home Phone _____ Work Phone _____

PHYSICIAN _____ Phone _____

DATE OF LAST TETANUS SHOT _____

INSURANCE AGENCY NAME _____

POLICY NUMBER _____ EXPIRATION DATE _____

GROUP NUMBER _____ AGENCY PHONE _____

DESCRIBE ANY HEALTH PROBLEMS OF STUDENT:

ALLERGIES (drug or other):

PLEASE LIST ANY MEDICATION PRESENTLY TAKING:

LIST ANY ACTIVITIES THAT YOUR STUDENT CANNOT DO:

In the event that my student _____ becomes ill or sustains an injury while engaged in any activity or student ministries trip sponsored by or associated with Christ Church of College Station, Texas, between the dates of **September 1, 2021 and August 31, 2022**. I, the undersigned, give my permission to those in charge, or any other chaperone designated by the church, to take whatever steps are necessary to render care and to administer first aid. I consent to any and all dental, medical, surgical and/or diagnostic procedures and treatment deemed necessary by a licensed dentist, physician or surgeon. I also consent to care in a hospital facility if necessary.

Further, in exchange for permitting the above-named student to participate in church activities, I agree to indemnify, defend and hold harmless Christ Church of and from any and all liability, claims, obligations, demands, liens, judgments, penalties, fines, suits, losses, costs or causes of action of any kind or character whatsoever, known or unknown, now accrued or which may hereafter accrue, arising from or in any way growing out of, derivative of, connected with, or resulting or arising from any lawsuit and/or claims that may be asserted with regard to any injuries sustained by the above-named student while engaged in a church activity. I agree that this indemnification includes the amount of any claim, the expenses of defending against any claim, attorney's fees and courts costs. I further agree that this indemnity expressly includes any claim arising out of Christ Church's own negligence, fault, comparative responsibility, breach of contract and/or warranty.

Signature of Parent or Guardian

Date