**STUDENT MINISTRIES MEDICAL INFORMATION FORM**

**FAMILY INFORMATION**

Parent / Guardian 1: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

Relationship: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

Mobile Number: [555-555-5555]

Email: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

Parent / Guardian 2: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

Relationship: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

Mobile Number: [555-555-5555]

Email: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

Street Address: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

City: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] State: [\_\_\_\_] Zip: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

Emergency Contact Name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] Tel: [555-555-5555]

Family Physician: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] Hospital Preference: [\_\_\_\_\_\_\_\_\_\_\_\_]

**CHILD 1**

Name: click to enter name

D.O.B. click to enter date

Gender: Male  / Female

School: click to enter text

Allergies: list all that apply

Health Conditions: list all that apply

Medications: list all that apply

Medical Insurance Provider: click to enter text

I.D. #: click to enter text

**CHILD 2**

Name: click to enter name

D.O.B. click to enter date

Gender: Male  / Female

School: click to enter text

Allergies: list all that apply

Health Conditions: list all that apply

Medications: list all that apply

Medical Insurance Provider: click to enter text

I.D. #: click to enter text

**CHILD 3**

Name: click to enter name

D.O.B. click to enter date

Gender: Male  / Female

School: click to enter text

Allergies: list all that apply

Health Conditions: list all that apply

Medications: list all that apply

Medical Insurance Provider: click to enter text

I.D. #: click to enter text

**CHILD 4**

Name: click to enter name

D.O.B. click to enter date

Gender: Male  / Female

School: click to enter text

Allergies: list all that apply

Health Conditions: list all that apply

Medications: list all that apply

Medical Insurance Provider: click to enter text

I.D. #: click to enter text

**PLEASE SUBMIT COMPLETED FORM IN PERSON OR BY EMAIL (PDF) TO SHERI PERENON [sperenon@redwoodchapel.org]**

**RELEASE AND WAIVER OF**

**LIABILITY AND INDEMNITY AGREEMENT**

In consideration of being permitted to utilize the facilities, services and programs affiliated with Student Ministries of Redwood Chapel Community Church (hereinafter, “STUDENT MINISTRIES”) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in STUDENT MINISTRIES (whether at Redwood Chapel Community Church or off-site), the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect or carefully consider such premises, facilities or affiliated program or activity. It is further warranted that such entry into STUDENT MINISTRIES for observation or use of any facilities or equipment or participation in programs affiliated with STUDENT MINISTRIES (whether at Redwood Chapel Community Church or off-site), constitutes an acknowledgement that such premises, affiliated program or activity, and all facilities and equipment thereon have been inspected or carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation.

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. As a result, federal, state, and local governments and agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. Redwood Chapel Community Church has put in place preventative measures to reduce the spread of communicable diseases, such as COVID-19, but we cannot guarantee that you or family members will not become infected with a communicable disease.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER STUDENT MINISTRIES FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN STUDENT MINISTRIES (WHETHER AT REDWOOD CHAPEL COMMUNITY CHURCH OR OFF-SITE), THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. The children and parents or legal guardians listed above and any personal representatives, heirs, and next of kin (hereinafter referred to collectively as “Releasors”) hereby RELEASE, WAIVE, DISCHARGE FROM ALL LIABILITY, AND COVENANT NOT TO SUE Redwood Chapel Community Church, and each of their administrators, directors, officers, pastors, board members, employees, volunteers, representatives and agents (hereinafter referred to collectively as “Releasees”) for any loss, expenses, damages, or any claim or demands related to any illness, injury, or death of Releasors, or costs of any medical treatment in connection therewith, or any damage to property of Releasors, whether caused by the negligence of the Releasees or otherwise while the Releasors are in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with STUDENT MINISTRIES (whether at Redwood Chapel Community Church or off-site). Releasors understand and agree that this release includes any claims related to exposure to communicable diseases (including COVID-19), whether a communicable disease infection occurs before, during, or after participation in any program, service or activity affiliated with STUDENT MINISTRIES.

2. THE RELEASORS HEREBY AGREE TO INDEMNIFY AND REIMBURSE AND HOLD HARMLESS the Releasees and each of them from any loss, liability, injury, damage or cost they may incur due to the presence or actions of the Releasors in, upon or about the premises affiliated with STUDENT MINISTRIES or in any way observing or using any facilities or equipment affiliated with STUDENT MINISTRIES or participating in any program affiliated with STUDENT MINISTRIES (whether at Redwood Chapel Community Church or off-site), even if caused by the negligence of the Releasees. Releasors specifically agree to compensate the Releasees for reasonable attorneys’ fees and expenses which Releasees may incur in any action brought against Releasees as a result of such loss, liability, injury, damage, or cost.

3. THE RELEASORS ACKNOWLEDGE THAT PARTICIPATION IN STUDENT MINISTRIES (WHETHER AT REDWOOD CHAPEL COMMUNITY CHURCH OR OFF-SITE) IS VOLUNTARY AND THEREFORE RELEASORS ASSUME FULL RESPONSIBILITY FOR RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to negligence of Releasees or otherwise while in, about or upon the premises affiliated with STUDENT MINISTRIES and/or while using the premises or any facilities or equipment affiliated with STUDENT MINISTRIES or participating in any program affiliated with STUDENT MINISTRIES (whether at Redwood Chapel Community Church or off-site).

4. THE RELEASORS further expressly agree that the foregoing RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as permitted by the laws of the State of California and that if any portion thereof is held invalid or unenforceable, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

5. The parents and/or legal guardians of the children listed above have READ AND VOLUNTARILY SIGN THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agree that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

**PHOTO/VIDEO RELEASE AND AUTHORIZATION**

I am the parent and/or legal guardian of the children listed above and do hereby consent, grant full permission, and authorize the release, publication, dissemination, distribution, use, and/or reproduction of any and all photographs (in print or electronic format, including but not limited to the world wide web), audio recordings, or video that may be taken of my children listed above during their participation in STUDENT MINISTRIES (whether at Redwood Chapel Community Church or off-site). This release and authorization acknowledges that all audio recordings, print and electronic photographs shall constitute the property of STUDENT MINISTRIES and may be used by STUDENT MINISTRIES for any purpose determined at its discretion, including but not limited to advertising, fundraising, or promotional publications, without further notice, consideration or compensation to me or my children, or approval by me or my children. Releasors also waive any right to royalties or other compensation arising from or related to the use of said images by STUDENT MINISTRIES. Releasors release Releasees from liability for any violation of any personal or proprietary right Releasors may have in connection with such use, or from the authorized use of the image of the children listed on this form. Please be advised that STUDENT MINISTRIES makes a practice of posting pictures of children in STUDENT MINISTRIES and STUDENT MINISTRIES’ activities on a “private” Facebook page that is accessed by invitation only.

**MEDICAL RELEASE AND AUTHORIZATION**

I am the parent and/or legal guardian of the children listed above and do hereby authorize Releasees to take any and all actions that may be necessary or proper to provide for, or arrange for the provision of, the health care of the minor children listed above during their participation in STUDENT MINISTRIES (whether at Redwood Chapel Community Church or off-site), including but not limited to signing forms that would ensure the necessary and immediate treatment of the STUDENT MINISTRIES participant, selection of a physician or dentist, examination, diagnosis, treatment, first aid, anesthetic, surgery, and/or arranging to have the STUDENT MINISTRIES participant transported to a medical facility for such care. It is understood that this authorization is given in advance of any specific diagnosis, treatment or health care being required, but is given to provide authority and power to Releasees to give specific consent to any and all such diagnosis, treatment or care. Releasors agree to be responsible for any and all charges incurred in connection with any care or treatment rendered pursuant to this authorization, even if a Releasee has signed documentation promising to pay for such care or treatment. Releasors release Releasees from all liability in connection with such health care treatment, even if caused by the negligence of the Releasees.

**PARENTAL CONSENT**

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASES. As a parent and/or legal guardian, I remain legally responsible for any personal actions taken by the children listed above, and represent that the children listed above are physically and mentally able to participate in STUDENT MINISTRIES, and consent to their participation in any STUDENT MINISTRIES program or activity (whether at Redwood Chapel Community Church or off-site). I agree that these releases will remain in effect as long as the minor children named above are participants in STUDENT MINISTRIES.

Date: [mm/dd/yyyy] Printed Name of Parent or Legal Guardian: click here to enter first and last name

By checking this box you verify that you are at least 18 years old and are either the parent or legal guardian of the above named minor(s).