



Grace Point Youth 2021 | Medical Liability & Trip Contract

STUDENT INFORMATION:

NAME _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

SCHOOL _____ GRADE _____ Birthday _____

Gender: M F

EMERGENCY CONTACT INFORMATION:

PARENT/GUARDIAN _____

PHONE _____

EMAIL _____

ALTERNATE CONTACT:

NAME _____ PHONE _____

FAMILY PHYSICIAN:

NAME _____ PHONE _____

Do you have medical insurance? Yes () No () NAME OF CARRIER _____

POLICY # _____ PHONE _____

HEALTH HISTORY:

Do they have any medical conditions we should be aware of? ____ Yes ____ No

If yes, please list:

Do they have any medications that must be taken? ____ Yes ____ No

If yes, please list:

Do they have any drug allergies: ____ Yes ____ No

If yes, please list:

Do they have any activity restrictions? ____ Yes ____ No

If yes, please list:

(Please sign and return to Stu Biegler at Grace Point Fellowship)

Liability / Medical Release:

NOTE: Every activity sponsored by Grace Point Fellowship is carefully planned and adequately staffed by mature adults. However, even with the best of planning and precaution, unforeseen events can occur. By signing this form, the parent or guardian agrees to assume and accept all risks and hazards inherent in activities sponsored by Grace Point Fellowship. The parent also agrees not to hold this organization or its employees or volunteers liable for damages, losses, or injuries to the person named above on this form. The parents or guardian understands that they are signing for the minor listed on this form and their signature is for both medical and liability release.

MEDICAL AND LIABILITY RELEASE:

This health history is correct, so far as I know. In the event I cannot be reached in an emergency during the dates specified on this form, I hereby give my permission to Grace Point Fellowship to hospitalize, to secure proper treatment and/or to order injections, anesthesia, or surgery for my child as deemed necessary. I realize that I will be contacted at the earliest possible moment in case of such an emergency.

I also agree to bring my child home at my expense should he/she become ill or if a student ministries staff member deems it necessary for behavioral or other reasons. In the case of noncompliance to camp rules or behavioral issues one or more of the following measures will be taken:

1. A meeting with the trip director.
2. Phone call home to inform parent or guardian of situation. If a valid solution cannot be agreed upon, one of the two following measures will be taken:
 - A. Parent or guardian can arrange to come get the student.
 - B. Student can be sent home with the understanding the complete expenses will be paid for by the parent or guardian.

PHOTO RELEASE:

During this event, your student may be recorded or photographed. Your student's involvement in this event constitutes your permission for Grace Point Fellowship to use any image or recording for any future purpose, including social media, without remuneration.

This authorization shall remain in effect from January 1st, 2021 to December 31st, 2021.
Unless noted otherwise here: _____

DATE: ___ / ___ / _____

SIGNATURE OF LEGAL GUARDIAN _____

SIGNATURE OF STUDENT _____