

ALL PARTICIPANTS 2020-2021
Westminster Presbyterian Church Emergency Information Card

I give my permission for _____ to be transported in vehicles and participate in all activities sponsored by W.P.C. I authorize emergency medical treatment for _____ if necessary. W.P.C. will not be held responsible for injuries incurred while at church sponsored activities.

NAME _____ **Date of Birth** _____

Address _____ **City** _____

E-Mail _____ **Grade** _____ **School** _____

Cell Phone Number _____

1st Parent/Guardian (if under 18) _____

Address (if different from above) _____

Place of Employment _____

Phone (home) _____ (work/cell) _____ **E-Mail** _____

2nd Parent/Guardian _____

Address (if different from above) _____

Place of Employment _____

Phone (home) _____ (work/cell) _____ **E-Mail** _____

Youth resides with _____

Physician _____ **Phone** _____

Address _____

Preferred hospital for emergency treatment _____

Health Insurance policy name and number _____

Allergies _____ **Date of last tetanus** _____

Medications _____

Emergency Contact (if parents can't be reached) _____ **Phone** _____

Signature of participant or parent if under 18 _____ **Date** _____

OTHER INFORMATION WE SHOULD KNOW:

Please see reverse side



consent release for photos and videos of minors

we WOULD LIKE your permission to use photographs or videos taken of your child at Westminster Presbyterian Church (Westminster), Camp Henry, and Westminster Child Development Center (WCDC), including photographs and videos taken during field trips, special events, and celebrations sponsored by Westminster, Camp Henry and the WCDC.

The uses for which we are requesting your permission include, but are not limited to (1) internal display at Westminster, WCDC, and Camp Henry, and (2) external publicity and marketing, in brochures and other printed formats and on websites, including Westminster's website, Facebook, YouTube, and other social media websites.

No compensation is offered for the use of these photographs or videos.

For safety, photographs and videos of children under the age of 18 used for external publicity will not be accompanied by their names or ages without permission from a parent or legal guardian. All photographs and videos of children used in the ways described above will be available for the children's parents or legal guardians to review upon request. If you sign this consent form, you shall still have the right to request that any specific photograph or video not be used for external publicity in brochures, websites and other formats.

You may change or revoke this permission at any time by notifying us in writing.

- YES, I agree to allow photographs and videos to be taken of my child and used
- by Westminster, WCDC, and/or Camp Henry for internal display by Westminster, Camp Henry and/or WCDC;
 - and for external publicity in brochures, on websites and other formats.

I give this consent with no claim for payment. I understand that all photographs and videos will be available for my review if I should request it.

Child's full name: _____

Parent's or legal guardian's full name: _____

Parent's or legal guardian's signature: _____

Date: _____