



One Year Permission
Parent Consent | Medical Release
All Oxford Bible Fellowship Activities
January 2017 to December 2017

Name: _____ Age: _____ Birthday: _____ Grade: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip: _____ School: _____

Does your child use prescription medication? If so, please list the exact medications sent and the instructions for its proper use: _____

Does your child have any special instructions, diet, allergies, or health conditions of which we should be aware? _____

Emergency Contact Information:

Father/Guardian's Name: _____

Mother's Name: _____

Work Phone Number _____ Cell Phone Number _____

Work Phone Number _____ Cell Phone Number _____

Emergency Contact Person (other than immediate family) Phone Number Relationship to Child

Name of Hospitalization Insurance _____

Policy/Subscriber Number _____

The undersigned does hereby give permission for our (my) child to attend and participate in the official sponsored activities of the Youth Ministries of Oxford Bible Fellowship, 800 S. Maple Ave. Oxford, OH 45056. Phone: (513) 523-5300.

I acknowledge that participation in the activity described above involves risk to the Participant (and to Participant's parents or guardians, if Participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage and financial damage.

In consideration for the opportunity to participate in the activity described above (the "Activity"), the Participant (or parent/guardian if Participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the Activity. The Participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the Activity or during transportation to and from the Activity, as well as for any medical treatment rendered to the Participant that is authorized by the Sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the "Activity Sponsor"). Further, the Participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the Activity Sponsor for any injury arising directly or indirectly out of the described Activity or transportation to and from the Activity, whether such injury arises out of the negligence of the Activity Sponsor, the Participant, or otherwise.

Father Signature _____

Mother Signature _____

Legal Guardian Signature _____

Relationship to Child _____