

2020 Medical Information and Release

Name of Sponsoring organization: Grace Community Church/Velocity Student Ministries

Church Address: 4703 Pulaski Hwy; Statesboro, GA 30458

Church Telephone: 912-852-9242

Event Leader/Coordinator: Tyler Woodson

Leader's Phone: 912-230-5681

**This form covers all Velocity Student Ministry events from
January - December 2020**

Participant Information

(To be completed by participant or an authorized guardian)

Name of participant: _____

Address: _____

Telephone: _____

Name of emergency contact: _____

Telephone: _____

Is sponsor authorized to approve medical treatment?

Yes _____ No _____

Is participant covered by personal/family medical insurance?

Yes ___ No ___

If yes, name of insurer: _____

Policy or group number: _____

Allergy List

Please list any food, medical, or other allergies your child may have:

Other Notes

Please note anything else we might need to know about your child when taking him or her on a trip.

Participation Agreement

By signing below, the participant (or parent/guardian if participant is a minor) acknowledges and accepts the risks of physical injury associated with participation in the activity described above. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily or personal injury sustained during the activity. Further, the participant (or parent/guardian) promises to hold harmless the sponsoring organization and its representatives for any injury related to the activity. If dispute over this agreement or claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

Signature: _____ **Date:** _____

(Participant or parent/guardian if participant is a minor)

Email completed form to Tyler@gracestatesboro.com