



Adult Medical Release 2018

Individual Information

Name _____ Birthdate _____ Medical Ins. Co. _____
Address _____ Cell Phone _____ Policy Number _____
City _____ State /ZIP _____

In case of emergency, an alternate contact is:

Name _____ Relationship _____ Home Phone _____ Cell Phone _____
Name _____ Relationship _____ Home Phone _____ Cell Phone _____

Agreement

I, the undersigned listed on this form, grant permission for participation in the various outings and events sponsored or attended by Emmanuel Bible Fellowship. I have been advised of the nature and extent of the activities that may take place and represent to you that I am physically and mentally able to participate in those activities.

I understand that this activity, as in any activity, does present the risk of injury or even death, and I have been advised of those possibilities. I represent to you that I assume the risk of any such injury or death, and hold you, your agents, employees, and representatives harmless from any liability to any other person or entity arising as a result of my conduct in this activity, and agree to defend and indemnify you, your agents, employees, and representatives against any claim or liability arising as a result of such contact. I understand if I am not able to be consulted in a medical emergency that every effort will be made to contact my alternate emergency contact. If I'm not able to be consulted in a medical emergency, you are authorized on my behalf to arrange for medical and/or hospital treatment as you may deem advisable for my health and well-being. In the event medical expenses are incurred, I accept my medical policy (listed above) has primary coverage, and the church's policy is secondary.

I understand activities could include both passive and active sports and games, including snow tubing, swimming, relays, soccer, tag, sleepovers, tug of war, group relays, water wars, waterslides, volleyball, dodge-ball, basketball, softball, baseball, football, roller-skating, skateboarding, bridge jumping, white-water rafting, hiking, caving, Wild Waves water park, inner-tubing, snow-mobiling, retreats, camps, mission trips, road trips or similar activities. This contract applies to ministry year 2017.

- I authorize the use of photographed images of myself in print, electronic, or video format.

(Circle **YES** if permission is granted)

(Circle **NO** if permission not granted)

Signature: _____

Date: _____