

**MINOOKA BIBLE CHURCH /// PERMISSION-MEDICAL AUTHORIZATION-AND
RELEASE OF LIABILITY**

I, _____ the undersigned parent or guardian of a minor, _____, do hereby consent to said minor attending the following Minooka Bible Church function:

I do hereby release and absolve said Minooka Bible Church, its employees, agents, the sponsors of the function, and any church members from any and all liability for damages or personal injury caused to said minor as a result of his/her participation in and travel to or from said function.

I further agree to indemnify the Minooka Bible Church, its employees, agents, the sponsors of the function, and any church members for any damage or injury caused by said minor. I hereby authorize any necessary emergency medical treatment to be given to said minor, and specifically authorize any adult sponsor, attending physician, or hospital to consent to medical treatment for the minor, which said sponsor, attending physician, or hospital may deem necessary under the circumstances.

The following information is provided and may be relied upon in an emergency. The church insurance is secondary to the injured party's primary insurance.

Current Medication: _____
Allergic Reaction to Medication: _____
Chronic Illness or Allergies: _____
Health Concerns: _____
Health Insurance Policy: _____
Policy No.: _____
Address: _____
Home Phone Number: _____
Alternate Phone Number (cell or work): _____

Secondary Contact Person & Relationship:

Secondary Contact Person Phone: _____

Signed: _____

Parent or Guardian Dated: _____