

Children sixth grade and younger must bring a parent/guardian to off campus activities.

Transportation Release Form

Participant _____

Address _____ Parent/Guardian _____

City _____ State _____ Phone _____

Age _____ Birth date _____ Alternate contact _____ Phone _____

I, _____, the undersigned parent/guardian of, _____, (child) agree and give permission to allow my child to ride with and be transported in Walnut Creek Baptist Church’s vehicles or other means of transportation.

We understand that the activity does present the risk of injury, or even death, to the participant, and we have advised the participant of those possibilities. We represent to you that we and the participant assume the risk of any such injury or death, and hold you, your agents, employees, and representatives harmless from any liability for injury or death to the participant while engaged in this activity which is caused by accidental forces beyond our control.

If we are not personally present at these activities in which the participant is to participate, so as to be consulted in the case of necessity, you are authorized on our behalf to arrange for such medical and hospital treatment as you deem advisable for the health and the well-being of the participant.

Parent/Guardian Signature _____ Date _____

Participant’s Signature _____ Date _____

This form must be signed and returned—only those who return this form properly signed can be granted permission to participate.

Medical Release Form

Please print all information.

Participant Name _____

Address _____ City _____ State _____ Zip _____

Age _____ Birthday _____ Home Phone _____

Name of Parent/Guardian _____

Parent/Guardian Phone Numbers: Home _____ Work _____

Alternate Contact _____ Phone _____

Any allergies or special medical needs _____

Is the above named participant currently taking any medications? _____

If yes, what is the medication and how is it to be taken? _____

(Medications will be maintained by an adult sponsor and administered according to your directions only.)

Medical Release Form

Serious Illness?

Date

Medications: Please list all medications that the camper is taking.

If there are any medications your child may need while at camp (such as inhalers, prescriptions), send them in the original container to the camp nurse.

Permission to administer:

Aspirin? Y N

Tylenol? Y N

Ibuprofen? Y N

Benadryl? Y N

INSURANCE INFORMATION

Name, phone, and address of Insurance Company

Policy #

Group #

Name of Insured

MEDICAL EMERGENCY AUTHORIZATION AGREEMENT

_____ (Student's name) has my permission to engage in prescribed activities, except as noted by me. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by an adult leader in charge, to order injection, surgery or any other medical treatment that may be deemed necessary to insure the well being of the above named, due to sickness or accident while participation in the activity, or in route to the activity. I also authorize the WCBC personnel adult leader to transport my child at their discretion in case of an emergency.

We represent to you that we and the participant hold Walnut Creek Baptist Church, its agents, employees, and representatives harmless from all liabilities arising as a result of the conduct of the participant and agree to defend and indemnify Walnut Creek Baptist Church, its agents, employees, and representatives against any claim or liability arising as a result of such conduct.

Parents'/Guardians' Signature

Date

Participant's Signature

Date

Activities Release

Please read the following statement carefully:

We have been advised of the nature and extent of the activities that may take place and state that the participant is physically and mentally able to participate in those events.

We understand that the activity does present the risk of injury, or even death, to the participant, and we have advised the participant of those possibilities. We represent to you that we and the participant assume the risk of any such injury or death, and hold Walnut Creek Baptist Church, it's agents, employees, and representatives harmless from any liability for injury or death to the participant while engaged in this activity which is caused or contributed to by the conduct of the participant, and agree to indemnify and defend WCBC, it's agents, employees, and representatives against any claim or liability asserted against them for any such injury or death to the participant.

We also hold WCBC, it's agents, employees, and representative harmless from all liability to any other person or entity arising as a result of the conduct of the participant in this activity and agree to defend and indemnify WCBC, it's agents, employees, and representatives against any claims of liability arising as a result of such conduct.

If we are not personally present at these activities in which the participant is to participate, so as to be consulted in the case of necessity, WCBC, it's agents, employees, and representatives are authorized on our behalf to arrange for such medical and hospital treatment as they may deem advisable for the health and well being of the participant.

By my signature, I authorize the above named participant to travel with Walnut Creek Baptist Church, it's agents, employees, and representatives thereof.

Parent/Guardian Signature _____ Date _____

_____ Date _____

By my signature, I as the participant, agree to follow the rules and directions of the adult sponsors who accompany me on the trip. I agree to conduct myself in a manner such that will represent my God, my church and my family in a positive way.

Participant Signature _____ Date _____