

Southside Baptist Church

505 Holsen Avenue

918-647-2244

Poteau, Oklahoma 74953

BUS RIDERS/GENERAL GUEST ENROLLMENT FORM

Child's Name _____ Age _____ D.O.B. _____ Grade _____

Address _____ Phone _____
(City, State, Zip)

Parent/Guardian Name _____ (Relationship) _____

Emergency Contact: Name _____ Phone _____
(Relationship) Cell Phone _____

Permission to Ride The Bus and Attend Scheduled Programs

Signature _____
(Parent/Guardian)

FORM MUST BE COMPLETED FOR CHILD TO ATTEND!

HEALTH INFORMATION

Allergies: ___ No ___ Yes If Yes, list what you are allergic to: _____

Medicine(s) you are presently taking _____

Date of last tetanus shot: _____ Are you current on all your shots? Yes ___ No ___

Are there any special conditions/health problems that we should be aware of: Yes ___ No ___

If yes, please explain: (use the back of this paper if necessary) _____

Your physician's name: _____ Office Phone # _____

PERMISSION TO RECEIVE MEDICAL HELP FOR CHILD IF NEEDED

I/we _____, parent/guardian of the above named child,
hereby give consent to provide this child with emergency care, and/or hospitalization for any
accident or illness which occurs while attending Southside Baptist Church, and also give
permission to transport child to and from localities where such health services are provided.

Signed: _____ Relationship: _____ Date: ___ / ___ / ___