

OUR REDEEMER LUTHERAN CHURCH - SOLON, OHIO

Youth Participant, Medical, Permission and Release Form

DISCLOSURE

Our Redeemer's youth events often involve a variety of activities that include warm-ups, games, group initiative problems, challenge course elements, and rigorous physical activities. The level of participation in any activity is decided by the individual participant.

Each participant is expected to have his or her own health/accident insurance. In addition, the following health/medical information, permission/release and youth consent form must be completed and signed.

PARTICIPANT INFORMATION

Name: _____ Social Security #: _____ Birthdate: ____/____/____

Parent/Guardian Name: _____ Home Phone: _____

Work Phone: _____

Name of other person(s) to contact if you cannot be reached _____

Phone Number: _____

MEDICAL INFORMATION

Health Insurance: ____no ____yes. If yes, company name _____

Company Phone Number _____ Policy Number _____

Limiting physical disabilities or handicaps?: ____no ____yes.

If yes, please explain _____

Current Medication (prescribed or over the counter)?: ____no ____yes.

If yes, what is the medication and what is it being taken for?: _____

Allergies? Reaction to Medications? Any other medical limitations?: ____no ____yes.

If yes, please identify and explain: _____

PARENTAL CONSENT

I, the undersigned parent/guardian, do hereby give permission for (participant name) _____ to participate with Our Redeemer Lutheran Church's youth activity _____.

In signing this document, I release Our Redeemer and its appointed staff, counselors and coaches from any form of liability, legal or otherwise, for injury. In the event I cannot be reached, I give permission for Our Redeemer's appointed staff, counselors or coaches to make any necessary decisions with regard to medical treatment that may be required. I also agree to charge (participant name) _____ to abide the rules and requirements of the adult leaders during the event with the understanding that disobedience can result in my child being sent home at my own expense.

Date: _____ Parent/Guardian Signature: _____

YOUTH COMMITMENT

I, _____, do hereby declare my desire to participate in the (activity) _____

I promise to support the group as a whole and to cooperate with the adult leaders in the activities which are planned.

Date: _____ Participating Youth Signature: _____