

**Redwood Covenant Church Emmaus Student Ministries**

**2016-2017 Consent and Release Form**

**This is the year long permission slip for all Emmaus Student Ministries activities in 2016-17**

PERSONAL DATA

Name \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_ School \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_ Grade \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

HEALTH INFORMATION

Allergies/Other Medical Conditions \_\_\_\_\_  
\_\_\_\_\_

Hospital Insurance Company \_\_\_\_\_ Address \_\_\_\_\_  
Policy Number \_\_\_\_\_ Policy Holder's ID # \_\_\_\_\_ Phone \_\_\_\_\_  
Doctor's Name \_\_\_\_\_ Address \_\_\_\_\_

EMERGENCY CONTACTS

Primary(parent(s) or guardian)  
Name \_\_\_\_\_ Address \_\_\_\_\_  
Day Phone \_\_\_\_\_ Night Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Secondary  
Name \_\_\_\_\_ Address \_\_\_\_\_  
Day Phone \_\_\_\_\_ Night Phone \_\_\_\_\_ Relationship \_\_\_\_\_

RELEASE FOR HEALTH CARE

In the event of an emergency or non-emergency situation in which medical treatment is required as a result of participation in the activities of Emmaus Student Ministries and/or Redwood Covenant Church during the period of time between September 1, 2016 to September 30, 2017, every reasonable effort will be made to contact the persons listed above. If unsuccessful in contacting the persons listed, consent is given for treatment by competent medical personnel. Further, consent is given to church staff or volunteers of Redwood Covenant church to hospitalize, secure proper treatment for, and to administer injection, anesthesia or surgery (under recommendation of qualified medical personnel).

\_\_\_\_\_  
signature of parent(s) or guardian of students

INDEMNIFICATION AND RELEASE

I/we, \_\_\_\_\_ are the parent(s)/legal guardians of \_\_\_\_\_ a minor and I/we hereby consent to said minor attending activities of Emmaus Student Ministries, the student ministry of Redwood Covenant Church of Santa Rosa, CA, that are scheduled from September 1, 2016 to September 30, 2017 which will include various modes of transportation such as bus, train, personal automobile, boat, dog sled, donkey, camel, escalator, moving sidewalk, etc. I/we hereby further consent to medical care and treatment being rendered or furnished to said minor as may be deemed necessary or required by those accompanying said minor in the event such circumstances should arise, and prompt notification of same will be given to the undersigned.

I/we, the undersigned, hereby agree to indemnify and hold harmless Redwood Covenant Church and any individual in his or her capacity as board member, officer, director, trustee, pastor, counselor, owners of loaned vehicles, or teacher from and against all claims, damages, losses and expenses, including attorney's fees, arising out of or resulting from participation of said minor in the activities indicated above.

\_\_\_\_\_  
signature of parent(s) or guardian

\_\_\_\_\_  
date