



Parental Consent and Medical Release

Please print all answers legibly. Do not leave any blanks. If the answer is none, then write "none" in the space provided.

Student's Name _____ Age _____ Current Grade _____

Address _____ City _____ Zip _____

Email Address _____ Parent/Guardian Name _____

Phone-(H) _____ (W) _____ (C) _____

Emergency Contact _____ Phone _____

Person(s) authorized to pick up or take custody of the child/student, other than the Parent/Guardian signing below, is/are as follows: _____

C3 Church should be aware of the medical condition, allergies, medications to be taken, or special needs of my child as follows: _____

Insurance Company covering student _____ Policy Number _____

To be completed by the parents or legal guardians of students under 18 years of age.

I, _____ the parent and/or legal guardian of _____, a minor,
(Parent/Legal Guardian) *(Student Name)*

hereby acknowledge that said minor, has my express permission to: Be cared for by C3 Church on student events during the year 2018. In the event of illness or injury, I give my full permission for those in charge to take any necessary steps to secure needed medical attention for my child/children. In the event I cannot be reached, I consent to x-rays, medical and or surgical treatment, hospital care and/or needed medications under direct supervision of a licensed physician and/or surgeon. I further express permission for my child to be transported by church owned or non-church owned vehicles in conjunction with the ministry events of C3 Church. I understand that such transportation could include, but not be limited to, taking my child from church property to the planned activity or event, returning my child to church property or any other designated location, stopping for gas, food, or drink, restroom breaks or for other reasons, as well as changes in planned routes due to unforeseen traffic conditions or emergencies. I understand and agree that C3 Church shall exercise its own judgment in determining the best logistics and schedule in transporting my child. I realize that in transporting my child, there is some risk of harm that could result in injury, either minor and temporary or serious, permanent and/or disabling, or even death. I recognize and believe that C3 Church will use its best reasonable efforts to avoid or minimize these risks, but understand that any number of factors (i.e., weather, driving skills of other drivers) are beyond its control. In order to help C3 Church safely transport my child, I have instructed him/her to follow all instructions and supervision of the church leaders, activity sponsors, or other parents on the trip. I further understand that a copy of this form is as valid as the original.

By signing this Consent and Release, I also agree to fully release and hold harmless C3 Church, its pastors, board members, employees, agents, borrowed servants, contractors and other workers, paid or volunteer, or their heirs and assigns, from any and all injuries, claims, liabilities or causes of action which may arise from transportation, accident, or injury of my child/student in conjunction with his/her participation in the ministry events of C3 Church.

Parent and/or Legal Guardian _____ Date _____

(Signature – must be in the presence of a Notary Public)

Notary Public: _____

Sworn to and subscribed before me on the _____ day of _____, 20____, by Notary

Public _____, STATE OF _____, COUNTY OF _____. SEAL: