



Coral Gables Congregational Church Authorization and General Release: Youth Group Activities and Trips 2011-2012

_____ has my permission to attend youth group activities and trips sponsored by Coral Gables Congregational Church during the 2011-2011 school year (15 August, 2011 through 31 August, 2012). I understand that transportation may be by automobile, bus or van, driven by a licensed, responsible adult, and/or on foot to nearby locations accompanied by a responsible adult, and/or by plane or boat while on Mission Trips in or out of the country while accompanied by a responsible adult.

I understand that there are risks involved in such activities and trips. I want my child to participate in these activities without risk to the Church, its employees and volunteers. In order to assure the Church that my child can participate in said activities and trips, I hereby represent that my child is healthy and capable of attending and participating in such activities and trips without risk of danger to him/her self or others. I understand that it is my responsibility to forbid and prevent my child's attendance and participation in any activities or trips, which my child is not healthy enough or mature enough to participate in.

Further, I do hereby release and forever discharge Coral Gables Congregational Church, its employees, administrators, successors and assigns, and any person selected by the Church to accompany my child (hereinafter Releases) from all liability for all loss or damage whether caused by the negligence of Releases or otherwise, and any and all actions, claims, demands, damages, costs and expenses which in any way grow out of, or arise in connection with the aforementioned youth group activities and trips.

Also, in the event of an emergency, I hereby authorize an adult leader as agent for me to consent to any x-ray exam, medical, dental or surgical diagnosis; treatment; and hospital care as advised or supervised by a licensed physician, surgeon, or dentist (as appropriate). I give my permission for an adult leader of Coral Gables Congregational Church to act as "*in loco parentis*" for my child during the dates of the aforementioned youth group activities and trips. I expect to be contacted as soon as possible.

Parent's Signature: _____ Home #: _____
 Printed: _____ Work #: _____
 E-mail: _____ Cell #: _____

Parent's Signature: _____ Home #: _____
 Printed: _____ Work #: _____
 E-mail: _____ Cell #: _____

Media Release

I give permission for Coral Gables Congregational Church to use my child's name, photograph and/or performance recordings (including audio and/or videos forms, in brochure, web and other promotional materials.)

Parent's Signature: _____ Date: _____

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Additional Family Information

Youth: _____

Address: _____ City: _____ Zip: _____

Youth's Cell #: _____ For Texting? Yes No

Youth's e-mail: _____ With Facebook access? Yes No

Birthday: (mo/dy/yr) _____ Grade: _____ School: _____

Parent/Guardian to receive weekly e-mail announcements: _____

E-mail address (if not already listed on previous page) _____

Emergency Contact Persons (other than a parent):

Name: _____ Phone #: _____

Name: _____ Phone #: _____

MEDICAL INFORMATION

Doctor's Name: _____ Phone #: _____

Chronic Illnesses, Allergies, Physical or Medical Restrictions:

Medications - AMOUNTS AND TIME TAKEN:

Other Medical Information

Youth Health Insurance Information

Youth listed On Policy: _____ Policy Holder: _____

Provider: _____ Phone #: _____

ID #: _____ Policy # _____ Group # _____