



2023/2024 PERMISSION SLIP - WAIVER & RELEASE FORM

Student Details

Name: _____ Date of Birth: ____/____/____

Address: _____

Email Address: _____ Cell Number: _____

Parent/Guardian Information

Name(s): _____

Email: _____ Phone Number: () - _____

Emergency Contact Details

In the event of an emergency relating to your son/daughter, please provide information of guardians or relations below which we can use to contact in case you are unreachable.

Contact 1: _____ Contact 2: _____

Email: _____ Email: _____

Phone Number: () - _____ Phone Number: () - _____

Medical Information:

Are there any medical conditions (i.e. allergies(food or medicinal), epilepsy, asthma, diabetes, travel sickness, etc.) of which we should be aware?

List all medications the youth will take during any youth ministry trips, retreats, or events. This includes any prescription or non-prescription medications, herbal supplements, and vitamins. **Any participant under the age of 18 is required to give ALL MEDICATIONS to the adult youth leader in their original containers with complete dispensing instructions before the start of the event. Youth are not permitted to carry any prescription or non-prescription medications, supplements, or vitamins and will be sent home at the parent/guardian's expense if they do.**

Medication Name	Dose	Treatment for	Dispensing instructions

PARENTAL/GUARDIAN CONSENT

The undersigned does hereby give permission for my child, _____, to attend and participate in on-site and travel based church activities for the period of Fall 2023 thru Fall 2024.

LIABILITY RELEASE: In consideration of **LifePoint Bible Church** allowing the Participant to participate in children/youth ministry (Sunday worship, Sunday meetings, activities, events, retreats, lock-Ins, trips, etc.) and childcare, I, the undersigned, do hereby release, forever discharge, and agree to hold harmless **LifePoint Bible Church**, its pastors, directors, employees, volunteers, and teachers (collectively herein the "Church") from any and all liability, claims, or demands for accidental personal injury, sickness, or death, as well as property damage and expenses, of any nature whatsoever, which may be incurred by the undersigned and the Participant while involved in the children/youth activities and childcare. I, the parent or legal guardian of this Participant, hereby grant my permission for the Participant to participate fully in children/youth ministry activities and child care, including trips away from the church premises. Furthermore, I, on behalf of my minor Participant, hereby assume all risk of accidental personal injury, sickness, death, damage, and expense as a result of participation in recreation and work activities involved therein. The undersigned further hereby agrees to hold harmless and indemnify said Church for any liability sustained by said Church as the result of the negligent, willful, or intentional acts of said Participant, including expenses incurred attendant thereto.

MEDICAL TREATMENT PERMISSION: I give permission for an authorized adult to give over-the-counter medication as needed and as directed on the label to treat non-emergency medical conditions that do not require a doctor or hospital visit such as a minor headache, stomachache, or allergic reaction (i.e. Tylenol, Advil, antacids, Benadryl, etc.) while at a youth ministry event? I authorize an adult, in whose care the minor has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical, or dental diagnosis or treatment and hospital care to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agrees to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child or youth pursuant to this authorization.

PHOTO RELEASE: The undersigned additionally gives permission for the church to publish photographs or video of my youth on the church website, social media and in the church newsletter.

TRANSPORTATION PERMISSION: The undersigned does also hereby give permission for my child/youth to ride in any vehicle driven by an approved and licensed adult chaperone while attending and participating in activities sponsored by **LifePoint Bible Church**. My child/youth and I understand that SEAT BELTS MUST BE WORN AT ALL TIMES during transportation.

I, the parent or guardian, give my child permission to ride with a youth leader or approved driver. I understand that care will be taken to ensure the health, safety, and welfare of my child. I realize and accept that in the event of my child's behavior adversely affecting the safety of the activity, the organizers reserve the right to return my child home.

Name of Youth Participant _____

Signature _____

Date __/__/__

Parent/Guardian name _____

Signature _____

Date __/__/__