

**Redefined Student Ministry
Church in the Word
Release Form**

Medical/Activities

Event: **Feed My Starving Children, Food Pack V, Hope-Filled Holiday Event
Saturday, December 10, 2-6 pm**

Name of Student: _____

1. **Student's Declaration:** I will fully cooperate with the staff, rules, schedule and any program established for the trip so as to not discredit my parents, my church or myself.

Student's Signature: _____

2. **Parent's Medical & Activity Release:** My student will cooperate with the staff, rules, schedule and any program established for the trip. I understand that I am responsible for my student's actions and will be held financially accountable for any damage done by my student. I will pay for any and all repairs incurred by such damage. I acknowledge that some of the activities involved with this trip contain inherent risk of injury. I understand that my own insurance is primary; our church activities insurance is secondary. I hereby consent to my student participating in all trip activities. I consent to any treatment deemed advisable in an emergency by an EMT, nurse, medical doctor or other first-aid personnel. I also certify that my student's immunizations are up-to-date and all allergies have been notified to the group leader.

Guardian Signature: _____ Date: _____

Relationship to Student: _____

Emergency Phone #: _____

Allergies/Current Medications: _____
