

**Community Bible Church Student Ministries  
Medical Release & Permission Form**

**Effective dates:** 8/20/17 to 8/19/18

Student Name \_\_\_\_\_ Birthday \_\_\_\_\_

Home Address \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Phone numbers \_\_\_\_\_  
(Home) (Parent cell)

Medical insurance company \_\_\_\_\_ Policy # \_\_\_\_\_

Other Emergency contact \_\_\_\_\_  
(Name) (Phone)

Special Information (Medical conditions, allergies, medicine) \_\_\_\_\_

This consent form gives permission for the student named above to participate in all youth activities sponsored by Community Bible Church (CBC) and releases CBC and its staff of any liability against personal losses of named child. It also grants CBC permission to take photographs and video of the student and use the images for any lawful purpose.

I/We, the parent/guardians of the student named above, give our consent for him/her to attend events being organized by CBC. I/We understand that there are inherent risks involved in any ministry or athletic event, and I/we hereby release CBC, its pastors, employees, agents, and volunteer workers from any and all liability for any injury, loss, or damage to person or property that may occur during the course of my/our child's involvement. In the event that he/she is injured and requires the attention of a doctor, I/we consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is required from a physician and/or hospital personnel, I/we agree to hold such person free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I/We also acknowledge that we will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider. Further, I/we affirm that the health insurance information provided above is accurate at this date and will, to the best of my/our knowledge, still be in force for the student named above. I/we also agree to bring my/our child home at my/our own expense should they become ill or if deemed necessary by the student ministries staff member.

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Student Rules of Conduct – We expect each student to conform to these rules of conduct during all activities:**

- Respect: God, leaders, others, property, and schedule.
- Mouth: No swearing, complaining, putdowns, and inappropriate language.
- No possession or use of alcohol, drugs, or tobacco.
- No fighting, weapons, fireworks, lighters, or explosives.
- No offensive or immodest clothing.
- No boys and girls alone. No PDA.
- Participation with the group is expected.
- All electronics (phones, iPods, Mp3 players, etc) must be turned off and put away during all youth activities.

**Students who fail to comply with these expectations may be sent home at their parents' expense.**

I, the student, have read the rules of conduct and agree to abide by them.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_