

**MOMENTUM CHRISTIAN CHURCH
STUDENT MINISTRIES PERMISSION AND MEDICAL CONSENT
For August 1, 2018 - July 31, 2019
Parent / legal guardian must read and sign this form**

PLEASE PRINT

Student Name: _____ **Age:** _____ **DOB:** ____/____/____

Gender: ____ **School:** _____ **Grade:** _____ **SS#:** _____ - _____ - _____

Parent/Guardian Name: _____ **Home Phone:** (____) _____

Street Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Emergency Name(must be other than parent/guardian): _____

Emergency Phone #: (____) _____

Ins Co: _____ **Type (HMO, PPO, etc):** _____ **Policy #:** _____

Policy Holder's Name: _____

Policy Holder's Date of Birth: ____/____/____ **Policy Holder's Social Security #** _____ - _____ - _____

Group #: _____ **State of Issue (If other than Ga):** ____ **Cust. Service #:(____)** _____

Claims Address: _____

GENERAL RELEASE HOLD HARMLESS AGREEMENT

The undersigned or a member of the immediate family of the undersigned desires to participate in various programs, events, or activities (hereinafter collectively referred to as "Activities") operated or sponsored by Momentum Christian Church (hereinafter referred to as MCC).

The undersigned or a member of the immediate family of the undersigned further understands and acknowledges that the undersigned or a member of the immediate family of the undersigned may incur personal injury or bodily damage while participating in such Activities.

The undersigned or a member of the immediate family of the undersigned further understands and acknowledges that MCC will not allow the undersigned to participate in such Activities without releasing and holding harmless MCC. Further, the undersigned or a member of the immediate family of the undersigned requests MCC to allow them to participate in Activities and in consideration thereof, agrees to hereby release, and forever discharge MCC, its officers, directors, employees, agents, and any parties volunteering on behalf of MCC, from all claims, costs, expenses or damages of any kind growing out of or related to any Activity of MCC in which the undersigned or a member of the immediate family of the undersigned participates.

The undersigned further acknowledges that this is a full and complete release for all injuries and damages which the undersigned or a member of the immediate family of the undersigned may sustain as a result of the undersigned's or a member of the immediate family or the undersigned's participation in any MCC program.

Dated: _____ **Signed:** _____
(Participant, if 18 years old or Participant's parent / legal guardian if under 18)

I, _____ being the legal guardian of _____
(Participant's parent / legal guardian) (Participant)

give my permission for him/her to participate in Activities under the direction of Momentum Christian Church. In signing this I give permission to Momentum Christian Church to use my child's picture in promotional materials. The undersigned, being a parent and/or legal guardian of the above minor, does hereby authorize the treatment of the above minor by a qualified and licensed medical doctor in the event of a medical emergency which, in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment, or undue discomfort if delayed, while said minor is participating in the Activities, including transportation to and from the Activity site. This authority if granted only after a reasonable attempt had been made to contact me. Specific medical allergies, chronic illness or other conditions: _____

Date of last Tetanus Shot: _____

Signed: _____ **Dated:** _____
(Participant's parent / legal guardian)