

# Newport Mesa Church Family Ministries

## Emergency Release Form (2019-2020)

NEWPORT  
MESA  
CHURCH

Child/Student Name \_\_\_\_\_ Gender: Male Female  
Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Grade Level \_\_\_\_ School \_\_\_\_\_  
Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Student's Cell Phone# \_\_\_\_\_ Student's Email \_\_\_\_\_

### Parent(s)/Guardian(s) Information:

1) Name \_\_\_\_\_ Contact Number \_\_\_\_\_  
2) Name \_\_\_\_\_ Contact Number \_\_\_\_\_  
Best Contact Email \_\_\_\_\_ Home Church \_\_\_\_\_  
List adults authorized to sign out child: \_\_\_\_\_  
\_\_\_\_\_

My child is EXCLUDED from release to the following persons: \_\_\_\_\_

Physician Name \_\_\_\_\_ Physician's Phone \_\_\_\_\_

Insurance Co. \_\_\_\_\_ Policy Number \_\_\_\_\_ Phone# \_\_\_\_\_

Date of Last Tetanus Shot \_\_\_\_\_ Does your child carry an Epi Pen? YES \_\_\_\_ NO \_\_\_\_

List allergies, medical conditions, special needs: \_\_\_\_\_  
\_\_\_\_\_

☐ Check this box if you are giving permission for your 5th/6th Grader to sign himself/herself out.

### MEDICAL RELEASE

I hereby release, forever discharge and agree to hold harmless, Newport Mesa Church, its elders, directors, employees and volunteers, from any and all liability, claims, or demands for 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 above named child that occur during any activities. Furthermore, I hereby assume all risk and personal injury, sickness, death, damage and expense as a result of participation in these activities. The undersigned further agrees to hold harmless and indemnify Newport Mesa Church, its elders, directors, employees and volunteers, for any liability sustained by said church as the result of the negligent, willful or intentional acts of the above named child, including expenses incurred attendant thereto.

I, \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_ herein authorize the adult sponsor of Newport Mesa Church to consent to any x-ray, examination, anesthetic, medical or surgical diagnosis or treatment, on the advice of any physician or surgeon licensed to practice in the state of treatment, when the need for such treatment is immediate, and when efforts to contact me are unsuccessful. This includes the transport of my child to and from church-related functions and events.

This authorization is given pursuant to Section 25.8 of the Civil Code of California, and shall remain effective until September 30, 2020.

Signature \_\_\_\_\_ Date \_\_\_\_\_

SIGNING THIS CARD INDICATES THAT YOU ARE GIVING US PERMISSION TO USE VIDEO AND PHOTOGRAPHY OF YOUR CHILD IN NEWPORT MESA CHURCH MATERIALS, PUBLICATIONS, & PROMOTIONS. DETAILED PERSONAL INFORMATION IS NOT USED ON THE WEBSITE.

IF YOU DO NOT AUTHORIZE YOUR CHILD'S IMAGE TO BE USED IN NMC PUBLICATIONS AND PROMOTIONS, PLEASE MARK THIS BOX. ☐

Leader: Please circle the group this child is in:

Childcare	56
Kidropolis	Junior High Elevate
Rainbows (Preschool/PreK)	High School Solid Rock
Brave Hearts (Little H / Discovery H / Adventure H)	Bible Quiz
Royal Rangers (Ranger K / Discovery K / Adv K / Exped)	

OFFICE USE ONLY: F1 \_\_\_\_\_ Date Received \_\_\_\_\_