

MEDICAL RELEASE & PERMISSION FORM 2020 - 2021

Monte Vista Baptist Church, 1735 Old Niles Ferry Rd., Maryville, TN. 37803

For your information, we expect each student to conform to these rules of conduct

- No possession or use of alcohol, drugs, or tobacco
- No students can drive
- No fighting, weapons, fireworks, lighters, or explosives
- No offensive or immodest clothing
- No boys in girls' sleeping quarters and no girls in boys' sleeping quarters without an adult present
- Participation with the group and all activities is expected
- Respect property
- Respect one another, staff, and adult leaders
- Respect and comply with event schedules
- Youth must travel in groups of 3 and an adult chaperone must know where they are at all times
- All items brought on a trip are subject to search

In the judgment of the Student Minister a Student who fails to comply with the directives of the student minister and/or volunteers may be sent home at their parents' expense.

I, the student, have read the rules of conduct and youth ministry guidelines, the above evaluation of my health, and permission to participate in youth group activities. I agree to abide by the stated personal limitations, Youth ministry guidelines and code of conduct.

Student signature: _____ Date: _____

Activities may include, but are not limited to: cookouts, boating, water skiing, swimming, basketball, roller-skating, tag, games in the park, soccer, ice skating, volleyball, softball, baseball, camping, downhill skiing, snowboarding, hiking, biking, concerts, Bible studies, golfing, miniature golf, hayrides. *Note: If you desire to limit your child's participation in any event, please submit your wishes in writing to the student minister prior to that event.*

_____ has my permission to attend all youth activities
NAME OF STUDENT

sponsored by Monte Vista Baptist Church, Inc. 1735 Old Niles Ferry Road Maryville, TN 37803 (hereinafter the "Church") from June 1, 2020 to July 31, 2021.

PERMISSION FOR MEDICAL TREATMENT

This consent form gives permission to seek whatever medical attention is deemed necessary, and releases the Church and its staff of any liability against personal losses of named child.

I/We the undersigned have legal custody of the student named above, a minor, and have given our consent for him/her to attend events being organized by the Church. I/We understand that there are inherent risks involved in any ministry or athletic event, and I/we hereby release and forever discharge the Church, its pastors, employees, agents, and volunteer workers from any 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 designated by the Church, I/we agree to hold such person free and harmless of any and all 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. Monte Vista Baptist Church has several photographers who will take footage throughout the year to use in promotional material and on the church website. My signature below gives permission for Monte Vista Baptist Church to use my student(s)'s image(s) in future promotional materials or on their website.

Parent/guardian signature: _____ Date: _____
(Do not sign except in presence of Notary)

Signature of Notary Public _____ Seal of Notary:

My Commission Expires: _____ Date: _____