



Medical Release Form & Permission Slip
Fall 2021 through Summer 2022

The Christian Church at Cogan Station
Lycoming Creek Rd., Cogan Station, PA. 17728
(570) 998-2989

Student's Full Name Birthdate
Home Phone Number School & Grade
Mother's Full Name Father's Full Name
Mother's E-mail Father's E-mail

MEDICAL INFORMATION CONTACT INFORMATION

Has this Student ever had: YES NO
Heart Disease
Asthma
Ear Infections
Bee Sting Allergy
Penicillin Allergy
Other Allergies
List Them:
Tetanus Shot
Date of last booster shot:
List Medications being taken:
Home Phone
Mother's cell
Father's cell
Youth cell
Youth e-mail
Emergency Numbers:
Name #1
Number
Name # 2
Number

In case of an emergency, I hereby give permission for my child (full name) to be treated by a qualified physician, to receive emergency treatment from a hospital, (selected by any of the adult sponsors from The Christian Church at Cogan Station accompanying this activity), including by not limited to emergency surgery, medical or dental treatment, and we assume the responsibility of all medical bills, if any.

Today's Date Mother, Father, or Legal Guardian's Signature

Insurance Info is needed in case of emergencies and WILL NOT be revealed to any persons except for Alex, medical personnel, or adult leader.

Insurance Company: I.D. or Policy Number
Youth Social Security #:

In consideration of my child being allowed to participate in activities sponsored by The Christian Church at Cogan Station, I (we), do for myself (ourselves) and for and on behalf of my child-participant, do hereby release, forever discharge and agree to hold harmless The Christian Church at Cogan Station and its employees, officers, directors, trustees, members, agents, elders, staff, trip sponsors, vehicle owners, and vehicle drivers 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 child-participant that occur while said child is participating in an activity sponsored by The Christian Church at Cogan Station. We understand that many of the activities will be physical in nature, will include travel and I (we), and on behalf of my (our) child-participant, hereby assume all risk of personal injury, sickness, death, damage and expenses as a result of participation in all activities involved therein. I (we) further hereby agree to hold harmless and indemnify said church, its elders, employees, officers, trustees, directors, members, staff, and agents, (including trip sponsors and vehicle owners) for any liability sustained by said church as the result of the negligent willful or intentional acts of said child-participant, including expenses incurred attendant thereto.

Today's Date Mother, Father or Legal Guardian's Signature

Home Address, City & Zip: