

(Complete both sides of this Form)



CHRISTLUTHERAN
providence | south | concord | online

2021 Medical & Release Form – Please Print (rev 2/21)

Full Name: _____ DOB: _____ Cell Phone: _____

E-mail: _____ Gender: _____ T-Shirt Size (adult): S M L XL XXL

Grade _____ School: _____

Address: _____

City: _____ State: _____ ZIP code: _____ Telephone: _____

Parent/Legal Guardian: _____ Cell phone: _____ Email: _____

Parent/Legal Guardian: _____ Cell phone: _____ Email: _____

Emergency contact if parent cannot be reached:

Name: _____ Relationship: _____

Home phone: _____ cell/work phone: _____

Health History

Do you currently have or have you ever been treated for any of the following?

| Yes | No | Condition |
|-----|----|---|
| | | Diabetes |
| | | Asthma |
| | | Congenital heart disease, chest pain, heart murmur, palpitations. |
| | | Lung/respiratory disease |
| | | Ear/eyes/nose/sinus problems |
| | | Head injury/concussion |
| | | Psychiatric/psychological or emotional disorders |
| | | Behavioral/neurological disorders |
| | | Blood disorders/sickle cell disease |
| | | Fainting spells and dizziness |
| | | Kidney disease |
| | | Seizures |
| | | Abdominal/stomach/digestive problems |

Allergies (Medications, foods, plants, bites)

| Name | Reaction |
|------|----------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Food Preference: _____
(example: vegetarian, vegan)

Date of last tetanus shot: _____

ATTACH A PHOTOCOPY OF BOTH SIDES OF YOUR CURRENT INSURANCE CARD.

List all medications currently used, including any over-the-counter medications.

| Medication | Dose | Frequency | Reason |
|------------|------|-----------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

List any over-the-counter medications that an adult can NOT administer to your child (Tylenol/Advil/Sudafed/Benadryl/etc.):

To the best of my knowledge, the information provided on this form is accurate and current. I will advise Christ Lutheran Church immediately if any of the information on this form changes. I authorize, in the event that I cannot be personally contacted, Christ Lutheran Church and/or its agents to provide and/or authorize any medical treatment in connection with any accident or similar emergency.

Parent/guardian signature and Date

Parent/guardian signature and Date

Parent Covenant, Media Statement, Release & Waiver

I, the parent or legal guardian of [print child's name] ("my child") hereby give my voluntary consent for my child to attend and participate in Christ Lutheran Youth events and activities ("CLC Activities").

I will support and encourage my child in his/her commitments, pray for him/her and all involved in the CLC Activities, and will do what I can to support the ministries of this church. I understand that I am responsible for my child's behavior and discipline and will work with the church leaders to ensure that expectations are met. If my child fails to meet these expectations as determined in Christ Lutheran Church's sole discretion, I understand that my child may be sent home from such trip, excursion, or local youth event and that I will be responsible for all cost and expenses related to my child's trip home.

I understand that persons from Christ Lutheran Church may photograph, videotape, and make recordings (collectively "Recordings") of on-campus and off-campus events that may include my child. I understand and agree that these Recordings are owned by Christ Lutheran Church and may be used by Christ Lutheran Church, including but not limited to, the church's website, social media, newsletters, emails, bulletin boards, etc.

In connection with Coronavirus (COVID-19), I understand that I must evaluate my family's risk in determining whether my child should participate in CLC Activities. I acknowledge and agree that CLC cannot guarantee that my child will not be exposed. At all times during my child's participation in CLC Activities, my child shall comply with all COVID-related procedures as required by law, as issued in guidance by the CDC, and/or that may be implemented by Christ Lutheran Church in its sole discretion, including but not limited to, mask wearing, temperature checks, and social distancing requirements.

I HEREBY FOREVER RELEASE AND DISCHARGE CHRIST LUTHERAN CHURCH, ITS EMPLOYEES, COUNCIL MEMBERS, VOLUNTEERS, AGENTS, AFFILIATES AND REPRESENTATIVES (COLLECTIVELY, "CHRIST LUTHERAN CHURCH") FROM ALL LIABILITY-- INCLUDING WITHOUT LIMITATION ANY INJURY, LOSS, OR DAMAGE OF PERSON OR PROPERTY—INCURRED IN CONNECTION WITH MY CHILD'S PARTICIPATION IN CLC ACTIVITIES. I ACKNOWLEDGE AND AGREE THAT IN NO EVENT, SHALL CHRIST LUTHERAN CHURCH BE LIABLE FOR ANY SPECIAL, INCIDENTAL, INDIRECT, OR CONSEQUENTIAL DAMAGES WHATSOEVER ARISING OUT OF MY CHILD'S PARTICIPATION IN CLC ACTIVITIES, EVEN IF CHRIST LUTHERAN CHURCH HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.

I hereby agree to indemnify, defend, and hold Christ Lutheran Church harmless from and against any and all claims, liabilities and damages that may be incurred in connection with my child's participation in CLC Activities (including travel to and from CLC Activities).

I have carefully read this document in its entirety and fully understand its terms and conditions contained herein.

Parent Signature: X _____

Date: _____

Youth Covenant

I understand that Christ Lutheran Youth events and activities ("CLC Activities") are faith-building, life-enhancing and friend gathering events. I covenant to take part fully in each event I am attending, giving it 100% and to treat people and property with respect at all time. I will stick to the agenda and not wander from the premises. When away from the large group, I will remain in a group of three or more people, and I will work with my adult chaperones by letting them know where I am at all times.

I will not participate in any behavior that tears down the event or any of the participants in it. I will strive to include everyone in the activities and be welcoming to all people. I will wear attire that is respectable and appropriate for the CLC Activity as well as show respect for another individual's "personal space". I understand that bringing or any use of weapons, alcohol, drugs, tobacco or lighters are not permitted. Any infraction in this area will result in being immediately sent home at the parent's expense by the next available means of transportation. All prescription and OTC (over the counter) medications must be included on the medication form on file with a parent signature. If I participate in any inappropriate behavior, my parents will be notified.

On special outings and summer trips, I will also **respect host churches** by being polite at all times; being pleasant and calm; bringing no food/drink into any of the host sanctuaries; honoring the roommate list as arranged by the host church--no last minute changes. I will **respect the host homes/hotels/camps by** having good manners at all times; leaving the bedroom and bathroom straight and clean; stripping or making the bed(s); gratefully eating what is offered; being in the bedroom by 11:00 (lights out at 11:30 & silent by midnight); writing a thank-you note, signed by each person.

I will **respect each other by behaving in appropriate ways at all times by:** absolutely using no foul language; making no negative comments about each other, the chaperones, the churches, or host families; treating one another as valued friends and all persons associated with the trip as equally important to the success of the trip; no PDA (public or private display of affection) except holding hands and appropriate hugs; dress should always be "school appropriate"; wearing no male or female halter tops, spaghetti straps, tank tops, Speedos/bikinis (unless covered up by non-white T-shirt); always following through on assigned duties such as set up and take down for The Experience Tour shows.

Above all, I understand that I am a representative of Christ and Christ's Church, and I will act in a way that glorifies God and is consistent with Christ's teachings.

Student Signature: X _____

Date: _____