

Release and Consent to Medical Care and Treatment for Minors Participating in Activities at Richland Baptist Church

Did you know that state law requires parental consent before a hospital's emergency department can give medical treatment to a child under the age of 18, except for truly life-threatening problems?

We make every effort to contact parents, but a completed consent form will insure treatment without delay.

Fill in the attached consent form authorizing medical treatment for your child, including pertinent medical information. This will be taken with students so that this medical information is easily accessible in case of an emergency.

I hereby release Richland Baptist Church, their staff and sponsors from responsibility and liability for injury or illness that my child may sustain during an activity. In the event of an emergency, I hereby authorize an adult leader of this activity, as agent for me, to consent to any X-ray care advised and supervised by a physician, surgeon or dentist (as appropriate) licensed to practice under the laws of the state where the services are rendered, either at a doctor's office or in any hospital. I expect to be contacted as soon as possible.

Signature of Natural Parent or Legal Guardian _____

Date _____ Emergency Phone Number _____

Student Information

Child's Name _____ Current Grade _____

Birth Date _____ Date of last tetanus shot _____

Drug allergies _____

Child's physician _____ Phone _____

Medical conditions or previous surgery _____

Regular medications _____

Family Information

Name of Parent or Legal Guardian _____
(please print)

Address _____ Phone _____

Father's work phone _____ Mother's work phone _____

Local relative or friend _____ Phone _____

Insurance _____ Policy Number _____

BTSBOS PERMISSION FORM

**I have read the letter including information about the BTSBOS 2010,
and I agree to allow _____**

Student Name

to participate in all activities including Underground Church.

Signed by parent or guardian