



Youth Ministry Medical Release Form

I, _____, (Parent/Guardian's Name) hereby give permission for any and all medical attention to be administered to my child, _____, (Child's Full Name) in the event of accident, injury, sickness, etc. under the direction of the person(s) listed below, until such time as I may be contacted. I also assume the full responsibility for the payment of any and all expenses incurred in connection with such treatment. My youth is aware of the Christian attitude that is expected of him/her and understands that no drugs, including alcohol or cigarettes will be allowed. I agree that I will hold harmless Our Lady of the Lake Catholic Church and its representatives and/or the Diocese of Nashville for any accidental injury that my child might receive during the event. The release is effective for all off-campus events with Our Lady of the Lake Catholic Church's Youth Ministry in Hendersonville, Tennessee, taking place during the 2022-23 School Year (8/1/2022 – 6/1/2023).

Parent/Guardian Information:

Address: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____
E-Mail Address: _____

Insurance Information:

Company: _____ Policy/Contract Number: _____
Group Number: _____ Telephone: _____

Physician Information:

Name: _____ Telephone: _____
Medical Conditions: _____
Known allergies: _____
Medications being taken: _____

If I cannot be reached, any of the following person(s) are designated to act on my behalf:

Name: _____ Relationship: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____
E-Mail Address: _____

Consent for medical treatment (minor):

As the parent/legal guardian of the above named child, I hereby give my consent for emergency medical care prescribed by a duly licensed hospital, Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Signature (Parent/Guardian): _____ Date: _____

Please provide a copy of your insurance card (both front and back) and return with this form.