

STUDENT MEDICAL RELEASE FORM

STUDENT'S NAME _____ BIRTHDATE _____
ADDRESS _____
HOME PHONE () _____ - _____ SCHOOL _____
PARENT/LEGAL GUARDIAN(S) _____
HOME PHONE () _____ - _____ WORK PHONE () _____ - _____
OTHER EMERGENCY CONTACT _____ PHONE () _____ - _____
FAMILY DOCTOR _____ PHONE () _____ - _____
INSURANCE CO. _____ IF NONE PLEASE CHECK _____
INSURANCE POLICY # OR GROUP # _____
KNOWN MEDICAL CONDITIONS _____
MEDICATIONS _____
ALLERGIES _____
LAST TETANUS IMMUNIZATION _____ CONTACT LENSES _____
WILL YOU ALLOW BLOOD TRANSFUSIONS? _____
OTHER _____

AUTHORIZATION OF CONSENT TO TREATMENT OF A MINOR:

(I) (We), the undersigned parent(s) of _____, a minor, do hereby authorize Grace Evangelical Free Church of La Mirada children's/youth ministry leaders as agent(s) for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under the general or specific supervision of, any physician and surgeon licensed under the provision of the Medical Practice Act, whether such diagnosis or treatment is rendered at the office of said physician or at a hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required, but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis treatment or hospital care which the aforementioned physician in the exercise of his best judgement may deem advisable.

This authorization is given pursuant to the provisions of Section 25:8 of the Civil Code of California. This authorization shall remain effective through the above named minor's graduation from high school, unless sooner revoked in writing delivered to said agent(s).

RELEASE OF THE GRACE EVANGELICAL FREE CHURCH OF LA MIRADA:

_____ (Parent's name) shall indemnify, hold free and harmless, assume liability for, and defend the Grace Evangelical Free Church of La Mirada, its agents, servants, employees, officers, and directors from any and all costs and expenses; including but not limited to, attorney's fees, reasonable investigative and discovery costs, court costs, and all other sums which the Grace Evangelical Free Church of La Mirada, assertion of liability, or any claim or action founded thereon, arising or alleged to have arisen out of _____ (child's name) use of real or personal property belonging to the Grace Evangelical Free Church of La Mirada, its agents, servants, employees, officers, and directors, or by action or omission by _____ (child's name).

PARENT/LEGAL GUARDIAN SIGNATURE _____ DATE: _____