

# Shades Crest Baptist Church Permission/Medical Release 2025-2026

Name \_\_\_\_\_ T-shirt Size (adult size) \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

### Parent's Names & Phone Numbers In Case of Emergency

Mother's Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Father's Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Other \_\_\_\_\_  
(Name and Relationship)

Insurance Company \_\_\_\_\_ Phone \_\_\_\_\_

Contract Number \_\_\_\_\_ Group Number \_\_\_\_\_

**GENERAL MEDICAL INFORMATION** (to be completed by parent/legal guardian): **TETANUS BOOSTER** (Date) \_\_\_\_\_

Does Your Child Have **ALLERGIES** (*food/drug/animal*) or Any **CONDITION REQUIRING SPECIAL CARE?**

(Diabetes, epilepsy, asthma, hemophilia, allergic reactions, etc.) \_\_\_\_\_ If yes, please identify and/or give desired procedure to follow.

COMMENTS \_\_\_\_\_

### **STUDENT MEDICATION** (to be completed only if student will take medication while on trip):

Name/Type Medication	Dosage	Time of Day to Administer	Possible Side Effects

**NOTE: All medication should have a prescription label on the container.**

I authorize a representative of Shades Crest Baptist Church to seek and sign for treatment of \_\_\_\_\_ (son/daughter) for any emergency medical treatment and/or diagnostic procedures by doctors and ER staff in treatment of patient.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

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My child has permission to attend and participate in activities sponsored by Shades Crest Baptist Church, including travel to and from such activities by church bus or charter bus. I also give permission for my child to travel with an adult in a personal vehicle when deemed appropriate by the leader of an activity.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian

State of \_\_\_\_\_

County of \_\_\_\_\_

Sworn to and subscribed before me on the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
**Notary Public in and for the State of** \_\_\_\_\_  
**My Commission expires** \_\_\_\_\_