



Student Permission Slip & Medical Release Form

Event: _____

Location: _____

Name/Phone# Of Leader(s) Sponsoring Event: _____

Pick Up Location/Return Time: _____

In order for your student to participate in the above outing, he/she must provide the filled out/signed permission slip to the above leaders on or before the date of the above outing. No student will be permitted to attend without a signed permission slip. I, _____, give my permission for my son/daughter, _____, to attend the above-mentioned outing. I release EUM Church and its representatives from and in connection with any claim brought by anyone arising out of said outing.

**EUM CHURCH
MEDICAL RELEASE FORM**

Parents, Please read and Sign at Bottom: EUM Church's policy is that families are responsible for any medical or health related issues or emergencies that arise on this trip. I/We release EUM Church and its representatives from and in connection with any claim brought by anyone arising out of all sponsored trips, retreats, and/or, on/off premises meetings. I/We further give our permission for any medical treatment deemed necessary while said child is under the care of EUM Church and its representatives as a participant. If participant is under 18 years of age, please have parents complete the following.

Signed _____ Date _____

Attempts will be made to call parent should medical treatment or hospitalization be required.

Name of Child _____

Parents' Names _____

Address _____

Phone (Home) _____ **(Cell)** _____

Birthday _____ **Grade** _____ **Gender** _____

Special Notes (allergies/medication) _____

Name of Insurance _____ **Policy #** _____