

Christ Church Release Form- Middle School Winter Retreat – January 2019

My child has permission to attend Christ Church Lake Forest's (CCLF) "Cove Winter Retreat" at Camp Timber-lee in East Troy, Wisconsin, from February 8-10, 2019. I understand that the retreat will include CCLF-sponsored youth activities including, but not limited to broomball, tubing, tobogganing, cross-country skiing, etc. I represent that my child is physically capable of engaging in such activities as he or she may choose. I also grant permission and authorization to the sponsors, chaperones, church staff, small group leaders and adult volunteers to seek and obtain such emergency care, first aid, or medical treatment as may be necessary in the event my child should be injured or become ill for any reason, at my expense.

I hereby authorize the licensed physician, emergency medical technician, hospital or other medical or health care facility to treat my child and perform all procedures deemed medically advisable for the purpose to attempting to treat or relived any injury received by my child.

Student Name: _____

Address: _____

Phone: _____

Emergency Contact: _____

Day Phone: _____ **Evening phone:** _____

Medical Information:

Does child have any medical condition that might need special attention?

Is the child allergic to any medication? _____

Is the child currently taking any medication? _____

Area all immunizations current? (MMR, tetanus, hepatitis) ☒ Yes ☒ No

Other important medical information: _____

By signing below, I acknowledge and accept the risks of physical injury associated with participation. Except for gross negligence on the part of the church or church staff, I accept personal financial responsibility for any injury sustained during the activity and I agree to hold harmless the church, church staff or volunteers for claims or damages which arise out of or relate to my child's participation in youth activities.

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____