

# Parental Consent, Certification, Liability Release and Medical Authorization

Central Assembly of God  
1202 W. Oxford  
Enid, Oklahoma 73703  
(580) 233-1818

Parents and Legal guardians of minor children are asked to complete this form and return it to Central Assembly of God. The information requested is designed to assist the church in providing for the safety of minors during church-sponsored activities.

General Information: *(please print)*

Child's Name \_\_\_\_\_ date of birth (mm/dd/yy) \_\_\_\_\_  
Child's Address \_\_\_\_\_  
Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_  
Home Phone Number \_\_\_\_\_  
Parent's Work Phone Number(s) \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_  
Age \_\_\_\_\_ Family Doctor \_\_\_\_\_  
Doctor's Phone Number \_\_\_\_\_  
Insurance Company Covering Child \_\_\_\_\_  
Policy Number \_\_\_\_\_  
Emergency Name and Phone Number \_\_\_\_\_

## Liability Release:

In consideration for being accepted by Central Assembly of God for participation in any youth event or activity, we (I) the undersigned, being 21 years of age or older, do for ourselves (myself) (and for and on behalf of my child-participating if said child is not 21 years of age or older) do hereby release, forever discharge and agree to hold harmless Central Assembly of God and the directors thereof from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the child-participant that occur while said child is participating in any and all events, or activity.

Furthermore, we (I) (and on behalf of our (my) child-participant if under the age of 21 years) hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in any and all events, activities, or in reaction and work involved therein

Central Assembly of God  
Parental Consent, Certification, Liability Release, and Medical Authorization Form

Further, authorization and permission is hereby given to said church to furnish any deemed necessary transportation, food and lodging for this participant.

The Undersigned further hereby agree to hold harmless and indemnify said church, its directors, employees and agents, for any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

Consent and Certification:

I, the undersigned, being the parent or legal guardian of the child named above (the "child"), do hereby consent to the participation of my child in **all events, activities, or recreation and work involved therein**. To include but not limited to, field trips, campouts, swimming, boating, hiking, sporting events, missions trips, and any other activities customarily associated with a church youth group.

Further, I certify that my child is physically fit and adequately trained to participate in such events, including swimming, except as noted below:

---

---

---

I agree to notify Central Assembly of God in writing in the event of any health changes that would restrict my child's participation in any or all events, activities, or recreation and work involved therein. I also understand that the adult supervisors reserve the right to restrict my child from any activity that they do not feel is within the physical capabilities of my child.

Medical Questionnaire:

**Is your child presently being treated for an injury or sickness or taking any form of medication for any reason?**

Yes    No                    If yes, please explain:

---

---

---

**Is your child presently taking any form of medication for allergies?**

Yes    No                    If yes, please explain:

---

---

**Does your child sleepwalk?**

Yes    No

**Can your child swim?**

Yes No

**Does your child have any physical condition or illness that would prevent him or her from participating in any event, activity or related recreation and work involved therein?**

Yes No

(If you checked yes to the preceding question, and desire for your child to be involved, a written release must be submitted by your child's physician authorizing your child to participate in any event, activity or related recreation and work involved therein).

Central Assembly of God

Parental Consent, Certification, Liability Release, and Medical Authorization Form

Does your child require a special diet?

Yes No

Medical Treatment Authorization:

I understand that I will be notified in the case of a medical emergency involving my child. However, in the event that I cannot be reached I authorize the properly appointed staff member to make emergency medical care decisions on my child's behalf, to secure the administration of medical treatment and/or medication, and do further agree to the performance of such treatment, anesthetic, and operations as in the opinion of the attending physician and/or nurse is deemed necessary for my child.

Parent/Guardian Covenant

I understand that while my child participates in any event, activity, or recreation and work related therein, of Central Assembly of God's Youth Ministry (Ignition Student Ministries), he/she is responsible to abide by the rules set forth by the sponsoring organization, its leaders and supervisory personnel. Any serious infractions of rules and/or inappropriate conduct by him/her can result in dismissal from the event. If he/she is dismissed from the event, I, the undersigned, agree to assume the cost of returning him/her home. I also agree to forfeit any possible refund. (I understand that such action would only be taken under extreme circumstances.)

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

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

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

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

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me,  
\_\_\_\_\_, a Notary Public in and for said state personally  
appeared \_\_\_\_\_ known to me to be the  
person who executed the within agreement, and acknowledged to me that  
be/she executed the same for the purpose therein state.

My Commission expires: \_\_\_\_\_

Notary's Signature: \_\_\_\_\_