

**Westbrook Church  
Student Ministries (6th-12th grade)**

**2011-2012 Registration / Medical  
Release / Permission Form**

This form will apply to all activities during the Sept 2011 through Aug 2012 ministry year. Youth activities may include, but are not limited to: cookouts, boating, swimming, basketball, laser tag, broomball, ice skating, volleyball, kickball, Frisbee, carpetball, dodgeball, field trips, service projects, transportation to & from events, Bible studies, horseback riding, and hayrides. If you desire to limit or restrict in your student's participation in any event, please submit your wishes in writing prior to that event.

**NEW:** to receive text messages of WSM events, please provide Cell Carrier information below.

Student's Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Grade: \_\_\_\_\_ Birth date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Mother's Name \_\_\_\_\_

Mother's Email \_\_\_\_\_

Mother's Cell Phone \_\_\_\_\_

Cell Carrier \_\_\_\_\_

Father's Name \_\_\_\_\_

Father's Email \_\_\_\_\_

Father's Cell \_\_\_\_\_

Cell Carrier \_\_\_\_\_

Student's Cell \_\_\_\_\_

Cell Carrier \_\_\_\_\_

Student's Email \_\_\_\_\_

Emergency Contact Name and Number: \_\_\_\_\_

\_\_\_\_\_

Church you currently attend \_\_\_\_\_

Request that participant's photo **not** be used on flyers, the church website, or for any publicity of the event.

**MEDICAL HISTORY**

Physician \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Dentist \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Date of last tetanus shot \_\_\_\_\_

Does your student wear: \_\_\_Glasses \_\_\_Contact Lenses

Should this student's activities be restricted for any reason?  
Please explain:

\_\_\_\_\_  
\_\_\_\_\_

List & describe any special medical conditions, allergies or needs this student may have:

\_\_\_\_\_  
\_\_\_\_\_

List names of medications and dosages that must be taken:

\_\_\_\_\_  
\_\_\_\_\_

Medical Insurance carrier \_\_\_\_\_

Policy # \_\_\_\_\_

**MEDICAL RELEASE**

The undersigned further consents to the administration of first-aid and/or doctor's care, or any other form of medical treatment necessitated by illness or injury that may require the same. In the event of the necessity of such care or treatment as heretofore described, the undersigned agrees to hold harmless and indemnify Westbrook Church, its directors, employees and agents from any acts of misconduct, and/or failure to act on the part of those chosen to administer medical aid on behalf of the participant.

\_\_\_\_\_  
Guardian's Signature

Date \_\_\_\_\_

In case of an emergency situation where my child would have to be taken to a hospital, I prefer him/her to be transported to

\_\_\_\_\_  
(name of hospital)

Effective Dates: \_\_\_\_/\_\_\_\_/\_\_\_\_ through  
Aug 31, 2012

**RELEASE FROM LIABILITY**

Guardians hereby authorize

\_\_\_\_\_  
to participate in ALL youth activities (unless otherwise specified as directed above) sponsored by the Student Ministries of Westbrook Church from today through August 31, 2011. Guardians hereby release, forever discharge and agree to hold harmless, Westbrook Church, from church sponsored events, 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 participant that occur while said person is participating in the events. The undersigned further hereby agrees to hold harmless and indemnify Westbrook Church, its directors, employees and agents for liability sustained by said acts of said participant, including any expenses incurred.

\_\_\_\_\_  
Guardian's Signature

Date \_\_\_\_\_

**Please return this form  
to the church office.**



**Jake Manne**, Student Ministries Director, x246  
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