



MEDICAL/LIABILITY FORM

Effective January 2020 – December 2020

Please provide photocopy of insurance card – front & back
Please update information if insurance changes

(Please Print)

STUDENT INFORMATION			
Child's Last Name:		First:	
Birth date: / /		Age:	Grade:
Parent/Guardian Email:			
Address:		City:	State: ZIP Code:
Parent/Guardian Name:			
Home/Mobile Phone Number:		Work Phone Number:	

INSURANCE INFORMATION	
Name of Policy Holder:	
Health Insurance Company:	
Policy or Group Number:	

STUDENT MEDICAL HISTORY	
Please list all current medication:	
Please list any food or medication allergies:	
Date of last tetanus shot:	
Physical Restrictions:	
Dietary Restrictions:	

IN CASE OF EMERGENCY		
Name of relative or local friend:	Relationship to student:	Phone no.:
1		()
2		()
Please complete page 2		

 FIRST BAPTIST
PIEDMONT
MEDICAL/LIABILITY FORM

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RELEASE INFORMATION

My student, _____, may be attending various events with First Baptist Church of Piedmont, Oklahoma, during the 2020 year. I may not be attending events with my student. In the event that my student needs emergency medical attention, First Baptist Church of Piedmont and/or any one of its agents or employees is hereby authorized to provide such emergency medical care, including without limitation; medical, dental, surgical care or hospitalization, to my student as recommended or suggested by a physician, nurse, surgeon, or other healthcare professional.

If such emergency care is provided, I understand that my student's health insurance and healthcare information will be provided to the healthcare professional and healthcare institution providing care for my student. I further understand that any expense not covered by my student's medical insurance shall be my responsibility. I understand that First Baptist Church of Piedmont will not be obligated to pay either the healthcare professional or me for any medical expenses incurred on behalf of my student.

There are instances when third party contractors may be used to operate and supervise various events and activities. In those instances where third party contractors are used, First Baptist Church of Piedmont, Oklahoma, is not responsible for the action of these third party contractors. First Baptist Church of Piedmont is also not liable for the actions or activities of participants or sponsors participating in events or activities operated by third party contractors.

In consideration of my child being allowed to attend activities with or at First Baptist Church of Piedmont, Oklahoma, I, on behalf of my child, hereby waive any and all causes of action, rights of claims or suits which I or my child may have against First Baptist Church of Piedmont, Oklahoma, its agents, contractors or employees as a result of injury to my child or arising from the decision of First Baptist Church of Piedmont, Oklahoma, or its agents, contractors or employees to consent for provision of emergency medical care to my child.

I understand that my child may be included in video highlights during the course of the year and that pictures may be posted on our Student Ministry website.

I give authority and permission to First Baptist Church of Piedmont, Oklahoma, staff and its agents to inspect my child's belongings while on activities, retreats or camps for the safety of my child, other students, staff, and agents of First Baptist Church of Piedmont.

Parent/Guardian Signature

Date