

**St. Paul Lutheran Church**  
**2011 ADULT General and Medical Release/Information Form**

Date this form was completed:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

With the signature affixed below, the above named is attending events sponsored by St. Paul Lutheran Church during the calendar year of 2010, expecting there is proper supervision and regard to the safety of all involved. This signed agreement hereby absolves the volunteer sponsors, the church, the church staff, and all members of its governing boards of any responsibility for the safety, welfare, health, and well-being for the above named beyond such matters as may be called reasonable care in the cases where it is necessary for any participant listed to be in the custody of a sponsor, and subject to the sponsor's clear instructions.

The undersigned also assumes, personally and exclusively, all responsibility and liability for any and all injury including property damage which may occur to the above-named during the time of church activities. I agree to behave responsibly according to the laws of the state and the reasonable expectations of the event leaders and other adult sponsors.

**The following information is important in case of injury and in the planning of meals.**

Any allergies/illnesses: \_\_\_\_\_

Any medication currently being taken: \_\_\_\_\_

**In case of emergency, call:** \_\_\_\_\_ **Relation to participant:** \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone #1: \_\_\_\_\_ Cell Phone #2: \_\_\_\_\_

Additional emergency contact: \_\_\_\_\_ **Relation to participant:** \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Insurance Information**

Carrier: \_\_\_\_\_

Name on policy: \_\_\_\_\_

Policy Number: \_\_\_\_\_

If emergency care is needed, the sponsor from St. Paul Lutheran Church has my consent to give permission for any reasonable care including medical and dental care that I may need while attending events.

**Participant Commitment:**

I understand that by participating in youth ministry activities with St. Paul and by signing below, I will:

- Respect myself, the youth, and the other leaders of each event.
- Remember that when on service events, I am serving God through serving His church.
- Remember that I am representing Christ in every activity and experience I am part of, and will do my best to speak and act in ways that follow His example in the Bible.
- Be fully engaged in each activity to the best of my ability at that time.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_