

Redlands Church
Liability & Consent Form for Minors
May 1 2013 - June 1 2014

Name: _____

Address: _____

Age: _____ Sex: M F

Grade in school: K 1 2 3 4 5 6 7 8 9 10 11 12

_____ has permission to go off-site with Redlands SDA Church.

I understand that specific arrangements will be provided prior to each trip during the calendar year stated above. I also agree to indemnify and hold harmless the sponsoring organization, Southeastern California Conference of Seventh-day Adventists, and sponsors from liability arising from any accident or injury that occurs during the duration of this trip. This specifically includes injury arising from negligence on the part of those mentioned above. This recognizes a shared responsibility among church, home, and student. This does not include gross negligence on the part of those mentioned above. This does not waive coverage within the policy limits of church accident insurance which covers church-sponsored activities.

In the event of sudden illness or accident requiring attention, my son/daughter has permission to obtain emergency medical services.

Signature of Parent or Guardian: _____

Print Name: _____ Date: _____

Please provide information regarding any medical issues, allergies, and/or medications:

EMERGENCY CONTACT INFORMATION

Name: _____ Phone: _____ 2nd Phone: _____

Name: _____ Phone: _____ 2nd Phone: _____

Name: _____ Phone: _____ 2nd Phone: _____