



Universal Release Form
 Preschool, Children, & Youth
 October 2017-September 2018

By signing below, I do hereby give my permission for my child(ren)/youth to participate in activities with First Baptist Church of Chattanooga. It is my understanding that the staff and volunteers of the church will take all necessary precautions to ensure the safety of my child(ren)/youth. I do hereby release the church of any legal or financial obligation due to accident or injury to my child(ren)/youth.

Yes No

I grant permission for any pictures taken of my child(ren)/youth to be used by the church in church related publicity, publications, and/or church related websites.

Name	Male/ Female	Age	Date of Birth	Grade (if applicable)	T-Shirt Size

Address: _____

Home Phone: () _____

Parents/Guardians: _____

Phone Numbers: Mom's Work: () _____ Cell/Pager: () _____

Dad's Work: () _____ Cell/Pager: () _____

Primary Email Address: _____

(PLEASE PRINT VERY CAREFULLY)

Alternate person to contact in case of emergency if parents/guardians cannot be reached

Name: _____ Relationship: _____

Phone: () _____ Alt. Phone: () _____

Primary Doctor: _____ Phone: () _____

Insurance Company: _____ Policy #: _____

Preferred Hospital/ER: _____

Any medical information that the staff needs to know (dietary needs, allergies, or medications being taken): Please note that the staff cannot dispense any medication unless listed on this form or additional instruction sheet signed by a parent/guardian.

In the event that my child(ren)/youth has need of medical attention, I do hereby give my permission to the staff or volunteers of First Baptist Church of Chattanooga to obtain such medical treatment as deemed necessary. I understand that every effort will be made to contact me or my alternate contact person.

Parent/Guardian Signature

Date