

Medical Release Form

Please fill out one form per child. This form will cover all Village Kids Camps, VBS, Music & Drama Camp, and Summer Kids Day Out programs.



VILLAGE CHURCH
Children & Family Ministry

Child name

Parent name

Physician name

Physician phone

Hospital preference

Allergies or special needs *If no allergies or special needs, write none. If a food allergy, indicate a safe snack.*

Activities your child **cannot** participate in

Alternate emergency contact(s) if parents cannot be reached

Name/relationship

Phone

Name/relationship

Phone

Other people to whom my child may be released

Optional Photo Exemption

Occasionally photos are taken of summer activities. **Not** signing the box below indicates your permission to display photos of your child in print or digital media.

I hereby **do not allow** Village Presbyterian Church to publish photographs taken of my child for use in the church's printed publication and website.

Signature

Date

Authorization for Emergency Medical Treatment and/or Transportation

1. I, _____ (Parent/Guardian) give permission for Village Church authorized staff to take my child, _____ to the hospital/physician listed below and/or the Med-Act for emergency treatment should the need arise while my child is in the custody of any Village Church summer programs.
2. I hereby give permission to the church representative to sign and effectuate any release, waiver, or other written agreement by any hospital, physician, or other medical provider in order that my child may receive such medical attention.
3. Immunizations are up-to-date and my child can participate in all activities unless otherwise stated above.
4. I further authorize a representative of Village Church or summer camp leader to transport my child on a walking field trip or off-campus field trip if applicable.



Child name

Parent name

Notarized Signature

Please wait to sign below in the presence of a notary public. To schedule an appointment with a notary on staff at Village, call Sandra at 913-671-2322.

State of _____ County of _____

This instrument was acknowledged before me

on _____ date by _____ name of person

Signature of Parent/Guardian

Signature of Notarial Officer

Notarial Officer Printed Name

Expiration date (seal)

Camps Enrolled

Week 1

Week 2

Week 3

Week 4

Kids Day Out _____ Music & Drama Camp _____ VBS _____