

LAST NAME: _____ GRADE: _____



2019-2020 RELEASE FORM

PERSONAL INFORMATION

Full Name _____ Prefers being called this name: _____

2015-2016 Grade _____ School _____ T-Shirt Size _____ Birth Date _____

Youth Cell _____ Youth E-Mail _____

Address _____ City _____ Zip Code _____

Parent or Legal Guardian Names _____

Please complete all spaces and then checkmark next to the best way(s) to contact parent/guardian:

Home # _____

parent/guardian's work/Cell # _____ does this number text? Yes No

parent/guardian's work/Cell # _____ does this number text? Yes No

parent/guardian email(s) _____

MEDICAL INFORMATION

- Does your child have any allergies? _____

- Does your child take any medications? _____

- Please indicate ANYTHING else leaders should know to avoid or help deal with your child's health including any other medications, ADD/Learning disabilities/medical conditions/restrictions to physical activity.

Name of Emergency Contact in case the Parent/Guardian cannot be reached: _____

Relationship to the child: _____ Cell Phone: _____

YOUTH COVENANT

Understanding that I am a child of God, and a representative of Christ and Christ The Servant Lutheran Church, I will act in a way that glorifies God and is consistent with Christ's teaching. This includes: fully participating in the events I attend; treating people and property with respect; striving to include all people; and making sure I am dressed appropriately. In addition, I will refrain from public displays of affection (PDA), and the use or possession of weapons, alcohol, tobacco, drugs or drug paraphernalia. I further understand that consequences for violating this covenant may include notification of a parent/guardian, and being sent home immediately at my own expense.

Youth Signature

Date

MEDIA RELEASE

I, the parent/guardian of (youth's name) _____, give permission for Christ The Servant Lutheran Church, Houston, TX to use, publish, or disclose newsletters, brochures, periodicals, posters, websites, or other media related vehicles, any photographs, videos, audios, and any other material in which I or my child may have appeared, spoken, written, or otherwise been represented. I understand a copy of this release will be kept on file to indemnify Christ The Servant Lutheran Church against any of their use of the materials indicated above.

Parent/Guardian Signature

Date

MEDICAL AND LIABILITY RELEASE OF A MINOR

I hereby indemnify and hold harmless Christ The Servant Lutheran Church from and against any liabilities that may be incurred during 2015-2016 events (including travel to and from events). I also authorize, in the event that I cannot be personally contacted, Christ The Servant Lutheran Church and/or its agent to authorize any medical treatment for the health/welfare of (youth's name) _____ in connection with any accident or similar emergency. I understand that I am responsible for any charges that may be incurred for such medical treatment. Release is valid thru September 25, 2016.

Parent/Guardian Signature

Date