

RIVERBLUFF CHURCH

Student's Name: _____
(Last) (First) (MI)

Address: _____

City : _____ State: _____ Zip: _____

Home Phone: () _____ Birthdate: _____ Grade: _____

Parent/Guardian Information:

Name: _____ Relationship: _____

Home Phone: () _____ Work Phone: () _____

Cell Phone: () _____ Second Cell Phone: () _____

Medical Information:

Activities (such as strenuous activities) to be restricted: _____

Health Conditions and Allergies: _____

Medications and Instructions: _____

In case of accident or serious illness, I authorize the appropriate care and treatment be rendered to my child by any physician and/or hospital. I authorize transportation to hospital through ambulance if needed. I will assume responsibility for the emergency care and/or transportation for said child.

Parent/Guardian

Date

Insurance Carrier: _____

Policy Number: _____

PLEASE INCLUDE A PHOTOCOPY OF THE FRONT AND BACK OF YOUR INSURANCE CARD TO BETTER SERVE YOUR CHILD. THANKS!

STUDENT MINISTRIES RELEASE FORM FOR EVENTS

GUIDELINES

(Please read carefully – these must be agreed upon and signed by both student and parent)

- Public Displays of Affection (PDA) will not be allowed. (Guys and Girls are friends on youth trips)
- At no time can guys enter girl's rooms or girls enter guy's room.
- No alcohol, tobacco products, or illegal substances will be permitted. (If a student is caught with any of these items, it is the responsibility of the parent(s) to come get their teen from the event)
- Students will listen to adult leaders. The leaders deserve their attention and respect.
- Students are expected to have fun, but not at anyone else's expense. Be considerate and Christ-like. Be a team player, an encourager, and a listener.

Name of Event: _____

Date(s) of Function: _____

Signature of Student _____

Signature of Parent _____