

Westmeade's Medical and Transportation Consent Form

Name: _____ Goes By: _____
Date of Birth: _____ S.S. #: _____
Address: _____
Parents' Name: _____
Parent's Work Location: _____
In Case of Emergency Notify: _____
Home Phone Number: _____ Work#: _____
Cell Phone Number: _____ Pager#: _____
Family Physician: _____ Phone#: _____
Hospital of Choice: _____
Family Insurance Company: _____
Policy #: _____

Past Medical History

Medications taken currently: _____
Medications you are allergic to: _____
Others—Foods: _____ Insect: _____ Poison Ivy/Oak: _____
Previous Operations or Serious Illnesses: _____
Childhood Diseases: _____ Chicken Pox _____ Measles _____ Mumps _____

Permission for Transportation/Treatment and Indemnity Clause

The undersigned parent or guardian of _____, a minor, hereby gives temporary custody of said minor to the pastor, youth minister, children's minister, or other activity leaders and convey full authority to any of them to transport and to make legal or other decisions, medically or otherwise, concerning said minor in my absence while participating in a church trip, activity, or function on or away from the church premises.

The undersigned agrees to indemnify and hold harmless from all claims, demands, costs, attorney's fees, damages, fees and causes of action arising or which might arise from the exercise of the above authority against the pastor, youth minister, children's minister, or activity leaders of Westmeade Baptist Church of Decatur, Al.

I verify that the above information is correct.

Signed _____ Date _____
Parent or Guardian

County of Morgan, State of Alabama

Notary Public Date _____

My Commission Expires: _____