

Saratoga Federated Church – Student Ministries
Medical Release Form - Jr. High/Green; Sr. High/Gold

Please Fill Out This Form **COMPLETELY** and turn it in with your Application & Deposit TODAY!
(Please give complete information so we can be prepared for emergencies!!)

Student Name (Last/First) _____

Address _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Emergency Contact Daytime location (city) and daytime phone:

Name _____ Phone _____

Name _____ Phone _____

MEDICAL INFORMATION . . .

List your **KNOWN allergies to medicines:** _____

List your **known food allergies** (list foods): _____

Date of Last Tetanus Shot: _____

Are you **PRESENTLY taking medication?** (insulin, anti-convulsant drug? If so, please give name of medication and dosage. _____

Do you wear **CONTACT LENSES?** _____

Do you have a **HEALTH PROBLEM** significant to our Student Ministry Leadership Staff such as vision or hearing loss, heart disease, diabetes, convulsive disorder, allergies or asthma? If yes, please explain:

Are you **SEVERELY allergic to insect stings?** _____ if yes, what specific action should be taken?

_____ **Epi-Pen ?** _____

Please explain any other medical allergies, problems or medical needs: _____

** Medical Insurance Co. _____ ** Policy # _____

** Medical Insurance Co. Phone (on back of insurance cards) (_____) _____

California Civil Code Section 25.8 provides that a parent/guardian may authorize an ADULT into whose custody a child is entrusted, to consent to necessary medical treatment. Pursuant to these provisions, (I) (We), the undersigned, do hereby authorize Saratoga Federated Church to procure medical, or hospital care for the above named child in the event of injury or illness while the child is in our care. It is understood that this authorization is given in advance of any specific care required, and is given to provide consent to diagnosis, treatment, or hospital care which a physician may in the exercise of his/her best judgment deem advisable. The undersigned will assume financial responsibility for any care so procured. Parents will be notified in case of emergency.

Signature of Parent/Legal Guardian with Legal Custody

Date

I understand that for the protection of our students as well as Saratoga Federated Church, Student Ministries has established a policy that High School students will NOT be authorized to drive for any off-site Student Ministry activities. (If a PARENT requests an older sibling to drive a brother/sister, they need an OK from our Director & a handwritten note)