

## **Creek Student Ministry**

### **Medical and Liability Release Form**

Cottonwood Creek's insurance provides for only secondary insurance. If you have medical insurance, your carrier will be billed for medical charges in the case of illness or injury while your child is on a church-related activity.

Do you have Health Insurance? Yes / No

Company Name \_\_\_\_\_

Policy Number \_\_\_\_\_

#### **Medical Release**

"In the event that I cannot be reached in an emergency during this event, I hereby give my permission to the nurse, physician, medical facility, or dentist selected by the leadership of Cottonwood Creek Baptist Church to hospitalize, to secure treatment, and or order an injection, anesthesia, or surgery for my son or daughter as deemed necessary. I authorize the staff in charge to obtain necessary medical attention in case of sickness or injury to my child."

#### **Liability Release**

By signing this form, the parent and or parents, or guardian agrees to assume and accept all risks and hazards inherent in church related activities. They also agree not to hold Cottonwood Creek Baptist Church or its employees or any volunteer assistants liable for damages, losses, or injuries to the person or property undersigned. The parents or guardians understand that they are signing for the minor listed on this form and the signature is for both a medical and liability release.

**Students Name: (print)** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Father: (sign)** \_\_\_\_\_ **or Mother: (sign)** \_\_\_\_\_

**Guardian: (if necessary)** \_\_\_\_\_

***(Signature Required)***

***Please attach a copy of your medical insurance card to this form.***