

Emergency Contact, Medical, and Image Authorization

This Information is Personal and Confidential

Parents and legal guardians of minor children (under 18) are asked to complete this form and return it to Tustin Presbyterian Church: The information requested is to assist the church in providing for the safety of minors during church-sponsored activities.

Emergency Contact Information (please print)

Minor's Name _____ DOB _____

Minor's Address _____

Minors Cell #

Father's Cell # ()

Mother's Cell # ()

Father's Email

Mother's Email

Medical Insurance Carrier

Policy #

Name of Policy Holder

Group #

Medical Treatment and Authorization

I understand that I will be notified in the case of a medical emergency involving my child. However, in the event that I cannot be reached, I authorize the calling of emergency services and/or a doctor, and the providing of necessary medical treatment/services in the event that my child becomes ill or is injured. I understand that the Church will not be responsible for medical expenses incurred, but that such expenses will be my responsibility as parent/guardian. Additional information may be written on a separate sheet and attached to this document. I agree to notify the Church in the event of any health changes that would restrict my child's participation in any normal activities. I also understand that the adult supervisors reserve the right to restrict my child from any activity they do not feel is within the physical capabilities of my child.

Signature of Parent/Guardian

Date

Image Consent

From time to time, with parental consent, TPC may photograph or videotape children's participation in its programs and use those images in publications, Internet websites, or other media for the purpose of promoting/interpreting the programs, without compensation to parents or children. In giving consent, parents waive the right to approve the final product; and release, and forever discharge TPC, its agents and employees, from any and all claims and demands arising out of or in connection with the use of said images.

Note: To ensure minors' identities are protected, any photos or videos published by TPC in print or electronic media **will not** have any captions, titles, tags, or descriptions that reveal the names of the relevant children.

I do / do not give my consent for my child(ren)'s image(s) to be used as described above.
(circle one)

Signature: _____ Date: _____

Presbytery Meeting, La Mirada Community Presbyterian Church

13701 Hillsborough Dr, La Mirada, CA 90638

Thursday, May 25, 2017 5:00- 8:00pm

Student Name: _____

I, _____ as parent / guardian of the above named child, give him / her permission to participate in this activity of Tustin Presbyterian Church Youth Group. I release the church and its representatives from any liability in the event of an accident enroute, during, or returning from an activity. I also authorize them to obtain any emergency medical attention that may be required during my child's attendance.

SIGNED: _____ DATE: _____

Parent / Guardian

Parent Phone Number: _____

I am available to drive _____ youth to and from this event.

I would like to volunteer to chaperone this event

Los Ranchos Presbytery Youth Gathering with special guest Roger Nishioka

St. Mark Presbyterian Church, 2200 San Joaquin Hills Rd, Newport Beach, CA 92660

Friday, May 26, 2017 7:00- 9:00pm

Student Name: _____

I, _____ as parent / guardian of the above named child, give him / her permission to participate in this activity of Tustin Presbyterian Church Youth Group. I release the church and its representatives from any liability in the event of an accident enroute, during, or returning from an activity. I also authorize them to obtain any emergency medical attention that may be required during my child's attendance.

SIGNED: _____ DATE: _____

Parent / Guardian

Parent Phone Number: _____

I am available to drive _____ youth to and from this event.

I would like to volunteer to chaperone this event

Tustin Chili Cookoff- Two hour Volunteer time slot

Old Town Tustin, El Camino Real
Sunday, June 4, 2017 11:00am- 5:00pm

Student Name: _____

I, _____ as parent / guardian of the above named child, give him / her permission to participate in this activity of Tustin Presbyterian Church Youth Group. I release the church and its representatives from any liability in the event of an accident enroute, during, or returning from an activity. I also authorize them to obtain any emergency medical attention that may be required during my child's attendance.

SIGNED: _____ DATE: _____
Parent / Guardian

Parent Phone Number: _____

I am available to drive _____ youth to and from this event.

I would like to volunteer to chaperone this event

Beach Bonfire

Bolsa Chica State Beach, Huntington Beach, CA
Friday, June 16, 2017 6:00- 10:00pm

Student Name: _____

I, _____ as parent / guardian of the above named child, give him / her permission to participate in this activity of Tustin Presbyterian Church Youth Group. I release the church and its representatives from any liability in the event of an accident enroute, during, or returning from an activity. I also authorize them to obtain any emergency medical attention that may be required during my child's attendance.

SIGNED: _____ DATE: _____
Parent / Guardian

Parent Phone Number: _____

I am available to drive _____ youth to and from this event.

I would like to volunteer to chaperone this event

We can bring _____ to this event

Summer Splash

Groves Residence, 4451 Rainbow Ln, Yorba Linda, CA 92886
Jeltema Residence, 19591 Country Haven Ln. Santa Ana, CA 92705
Mulligan Residence, 12121 Sky Ln. Santa Ana CA 92705
Webb Residence, 1571 Amberwood Dr. Santa Ana, CA 92705
Corona del Mar State Beach, Newport Beach, CA
Wednesdays June 21- August 16, 2017 6:00- 9:30pm

Student Name: _____

I, _____ as parent / guardian of the above named child, give him / her permission to participate in this activity of Tustin Presbyterian Church Youth Group. I release the church and its representatives from any liability in the event of an accident enroute, during, or returning from an activity. I also authorize them to obtain any emergency medical attention that may be required during my child’s attendance.

SIGNED: _____ DATE: _____

Parent / Guardian

Parent Phone Number: _____

I am available to drive _____ youth to and from this event.

I would like to volunteer to chaperone this event

Six Flags Magic Mountain

26101 Magic Mountain Pkwy, Valencia, CA 91355
Thursday, August 10, 2017 9:00am- 9:00pm

Student Name: _____

I, _____ as parent / guardian of the above named child, give him / her permission to participate in this activity of Tustin Presbyterian Church Youth Group. I release the church and its representatives from any liability in the event of an accident enroute, during, or returning from an activity. I also authorize them to obtain any emergency medical attention that may be required during my child’s attendance.

SIGNED: _____ DATE: _____

Parent / Guardian

Parent Phone Number: _____

I am available to drive _____ youth to and from this event.

I would like to volunteer to chaperone this event