



**Calvary Chapel of Kearny
Permission Form
Effective: June 14, 2013 – June 14, 2014**

_____ has my permission to attend, and participate, in weekly church services at Calvary Chapel of Kearny. These are held on Sunday mornings at 10:30am, and JAM Youth Group which meets the 2nd, 4th, and 5th Friday night of the month.

Parent's name: _____

Address: _____

Ph# (H): _____ (W) _____ (Cell) _____

Participant's Health Insurance Information:

Medical Insurance Carrier _____ Policy# _____ Group # _____

Health Information: (please check all that apply)

- | | | | | |
|---|-----------------------------------|--------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Ear infections | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Bleeding | <input type="checkbox"/> Hay Fever | <input type="checkbox"/> Penicillin |
| <input type="checkbox"/> Heart defect/disease | <input type="checkbox"/> Asthma | <input type="checkbox"/> disorder | <input type="checkbox"/> Poison Ivy | <input type="checkbox"/> Insect sting |
| <input type="checkbox"/> Seizures | <input type="checkbox"/> ADD/ADHD | <input type="checkbox"/> Mono | Other allergy _____ | |
| <input type="checkbox"/> Mumps | <input type="checkbox"/> Measles | <input type="checkbox"/> Chicken Pox | _____ | |

If any of the above are checked, please give details (for example, include normal treatment details for allergic reactions) _____

Does your child have any activity restrictions? Yes No If yes, please explain: _____

If I cannot be reached, I grant permission to any physician or emergency medical personnel to render medical treatment as necessary.

**PARTICIPATION & TRANSPORTATION
APPROVAL OF PARENT/GUARDIAN AND WAIVER OF CLAIM**

In consideration of the said Calvary Chapel permitting our child to participate in the aforesaid activities, and travel in the church van to and from church, we hereby agree to indemnify and save harmless said Calvary Chapel, its officers, volunteers, adult chaperones, employees and agents against any and all claims for loss or liability incurred by, or caused to our child, or his property, as a result of said activity.

Media Release Form: I understand and agree with my signature that Calvary Chapel of Kearny retains the right to use (without personal information) any photographs, videotapes, or any other record of their event for the church's website, publicity, advertising, or any other legitimate purpose.

Parent/Guardian's Signature _____ Date _____

We ask that all students adhere to our rules of conduct on trips and events, which include, but are not limited to the following: respect for people and property, no violence, no alcohol/drugs/weapons/tobacco/fireworks permitted. Students are not allowed to drive to events; modest and appropriate clothing is required.

Failure to comply with these expectations could result in your student being sent home.