

Diocese of Bethlehem Event and Medical Release Form For Children (through grade 5) Participating in Child Events

This 2 page form must be completed for each participant and signed by parent or guardian

Please Note: All information given is confidential and is not distributed to unauthorized personnel.

Event and Date: _____

Name of Participant: _____ Select: Male: _____ Female: _____

Participant's Email: _____ Parent's Email: _____

Date of Birth: _____ Age: _____ Phone: _____

Home Address: _____

Parent/Guardian Name: _____ Phone: _____

Parent/Guardian Name: _____ Phone: _____

Name of Parish (if applicable): _____

Doctor's Name: _____ Phone: _____

Dentist's Name: _____ Phone: _____

Health Insurance Company: _____

Group #: _____ ID #: _____

Parents or Guardians should complete the following Medical Information and Release:

1. Any physical or emotional health problems the staff should know about (if more space is needed write on back of page): _____
2. Any allergies: _____
3. Any dietary restrictions: _____
4. Any prescribed medications to be taken during the event (if more space is needed write on back of page):

Provide name of medicine, dosage, and frequency if not listed on medication
Please provide a sufficient supply for the period of this event

5. I give my permission for images of my child to be used in Diocesan Publications, online and in print for future events and promotions. These images may include still photographs or video images. _____ yes _____ no

Emergency contact during event (if other than above):

Name: _____ Phone: _____

Relationship: _____ 2nd Phone (if applicable): _____

In case of a medical emergency, I permit the event staff and/or adult supervisors to obtain or authorize emergency medical/dental treatment for my child. I further authorize the medical personnel selected by the diocesan staff and/or adult supervisors to administer such emergency treatment, including injections, anesthesia, or surgery as they deem necessary. I understand I will be notified of this emergency as soon as possible.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

AGREEMENT TO INDEMNIFY AND HOLD HARMLESS

This is to certify, I, as parent/guardian with legal responsibility for the participant named below, do consent and agree on his/her behalf and for myself, my heirs, assigns, and next of kin, to release and indemnify and hold harmless the Diocese of Bethlehem, its agents, employees, contractors or guests from any and all liabilities incident to the participant’s involvement in the Diocesan event as provided above. I release, waive, and discharge and agree not to sue or make any claim against the Diocese of Bethlehem for any and all claims on account of any damage to property or injury, caused or alleged to be caused by them or otherwise, in connection with the above-described event or related activities.

_____ (please print participant’s name)

_____ (please print name)

_____ Signature

_____ Date

**Diocese of Bethlehem Community Life Standards
for Children (through grade 5) Participating in Diocesan Events**

1. Everyone is expected to attend the entire event and participate in all activities.
2. All participants must follow the directions of the adult leaders.
3. Visitors are not allowed during Diocesan events for children and youth. A visitor is defined as a person who is unexpected and not registered.
4. The Diocese does not provide transportation to and from events for children and youth unless otherwise stated for a specific event. All transportation arrangements are to be made with parental permission. According to Diocesan guidelines, one child and one adult who are unrelated may not ride alone together in the car to or from diocesan events.
5. Public displays of affection that are a distraction from participation in the event are not allowed.
6. Bullying will not be tolerated.
7. Offensive language and inappropriate conversation is prohibited.
8. Potentially dangerous items (i.e. lighters, matches, pocket knives) are prohibited.
9. No one may leave the site of the event without the permission of the adult in charge of the event.

A warning will be given for breaking rules 1, 2, 3, 4 or 5.

A young person may be removed from the activity or sent home for breaking the rules 6, 7, 8 or 9, or for repeated violations of rules 1, 2, 3, 4 or 5.

The adult in charge of the event will make all decisions concerning consequences for unacceptable behavior. If the adult in charge determines that a child needs to be sent home, that child’s parents/guardian(s) will need to come immediately, or make arrangements for their child to get home immediately (at parent’s expense).

I hereby agree to abide by all rules of this event. I fully understand the consequences of breaking these rules.

Signature of Child Participant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____