CONGREGATIONAL CHURCH OF ALGONQUIN
109 Washington St., Algonquin, IL 60102
(847) 658-5308 www.algonquinucc.org Email: algonquinucc@gmail.com

Permission Slip and Medical Release Form

Event/Location:

Supervising Chaperone & Contact:

Items to bring:

Drop off time:

Students Name:_____ DOB:_____ Sex:_____ Last Tetanus:_____

Students Name:_____ DOB:_____ Sex:_____ Last Tetanus:_____

☐ Check here if parent is attending (no need to fill out below, if parent attends

Student(s) Name _____have/has the permission of the undersigned to participate in this activity sponsored by the Congregational Church of Algonquin. I also authorize the Congregational Church of Algonquin volunteers to provide transportation to and from this event if needed. I hereby release the Congregational Church of Algonquin from any damages which may result due to accident or injury. I do consent to any medical, surgical, or dental diagnosis or treatment that may be deemed necessary for my minor child(s). Further, I understand that all efforts will be made to contact me prior to treatment. In the event I cannot be reached in an emergency, I give permission to the activity leader to make the decisions necessary for treatment. Should there be no activity leader available, I give permission to the attending physician to treat my minor child(s). I further understand that the doctors, dentists and other providers attending to my child will take all reasonable safety precautions during their care.

Parent/Guardian Signature:_____Date:_____

Address:_____
(street) (city) (state) (zip code)

Emergency Contact:

1. Name:_____ Relationship:_____

Phone Home:_____ Phone Cell:_____

2. Name:_____ Relationship:_____

Phone Home:_____ Phone Cell:_____

Family Physician Name:_____ Phone:_____

Health Insurance Name:_____ Customer Service #:_____

Policy Holder:_____ Group #:_____ Policy #:_____

Allergies (specify child):_____

Medical Conditions (specify child):_____

Physical Limitations (specify child):_____

Current Medications (specify child):_____(form psmr 09/09)