## **INFORMATION AND EMERGENCY FORM – CHILDREN & YOUTH**

Child's Name:		Nickname		
Pronoun:	Age	D.O.B		Grade
Child's Phone	Child's Email			
Parent/Guardian 1	Phone:			
Email	Address			
Parent/Guardian 2	Phone:			
Email:	Address			
ALLERGIES (Please check				☐ Peanuts/Nuts ☐ Dairy
	clude conditions	that may affeo	ct a child's partic	cipation in activities at school):
Special Needs?				
Court-ordered custody res				
Name of Physician:	Phone			
Other Specific Physicians		Phone		
Name of Medical Insuran	ce Provider		Group#	ID#
EMERGENCY CONTACT INFORMATION (These individuals have permission to pick up your child)				
Name	Phone:			
Name	Phone:			
emergency, childcare prov Children should be <b>signed</b> should be left at home un	ase leave your pho viders must be abl lout at noon, or t til 24 hours after s	one on vibrate le to contact y he conclusion symptoms of	ewhen your su you by text withon of Sunday morn contagious illnes	n must remain on church pport is needed, or in case of out leaving the childcare room. ning programs. Sick children ss have passed (fever, sore ion about your child (ex. Likes to

**Acknowledgement of Risk and Safety – Continue to next page.** 

## Page 2, Continued Acknowledgement of Risk and Safety

## Your signature below verifies that:

- 1. You have completed the INFORMATION AND EMERGENCY FORM to the best of your knowledge.
- 2. You allow the adult volunteer leaders and FPC staff permission to administer any emergency first aid if deemed necessary, and give consent for medical emergency treatment of your child.
- 3. You understand it is our expectation that all children will conduct themselves appropriately. If we deem your child's behavior to be unacceptable, we will first work with the child, but parents will ultimately be responsible for retrieval of their child if it becomes necessary.
- 4. You agree to indemnify, release and hold harmless the First Presbyterian Church, its staff and volunteers from any and all claims or damages for any accident, injury or illness arising out of the use of facilities, equipment, and/or participation in FPC activities.

5. FPC will occasionally take photos/videos at various group activities or livestream church events such as the worship service. This media may be used within the church or published publicly on the church

website or church social media. No minor child will be identified by name or other personal information. Please check below to let us know your media use preferences. □ yes □ no I give permission for my child to be photographed and/or videotaped while participating in FPC programs and events to be shared in church publications in print or online. ves no I give permission for my child to appear in live-streamed church events which will appear publicly online ((ex. worship service) 6. DIAPERING: CIRCLE ONE Does Not Apply Child care workers may diaper as needed. Prefer to be called to diaper my own child as needed 7. Grades 7-12 ONLY: □ **yes** □ **no** I give permission to allow authorized youth leaders to contact my child. □ yes □ no I give permission to allow one-on-one meetings between authorized youth leaders and my child. □ yes □ no I give permission for my child to accompany classmates on field trips. This is a blanket permission slip valid for the academic year. Students will travel seat-belted in private passenger vehicles or rental van. Parent/Guardian 1: Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian 2 Signature \_\_\_\_\_\_ Date \_\_\_\_\_\_