

# FBC Parental/Medical Consent Form



Student's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Grade: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_  
Emergency #1: \_\_\_\_\_  
Emergency #2: \_\_\_\_\_  
Email: \_\_\_\_\_

## To Whom It May Concern:

The undersigned does hereby give permission for our (my) child, \_\_\_\_\_ to attend and participate in activities sponsored by First Baptist Church, Fort Mill.

Every effort will be made to contact parents prior to any medical treatment being rendered.

We (I) authorize an adult, in the care that has been entrusted to consent to any x-ray, anesthetic, medical, surgical, or dental diagnosis or treatment and hospital care to be rendered to the minor under the general or special supervision and on the advice of a dentist or physician licensed under the provision of the Medical Practice Act on the medical staff of a licensed hospital, whether the said diagnosis or treatment is rendered at the office of the physician or said hospital.

The undersigned shall be liable and agrees to pay all the expenses incurred in connection with such medical or dental services rendered to the aforementioned minor pursuant to this authorization.

The undersigned also gives permission for our (my) child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in the activities sponsored by First Baptist Church, Fort Mill.

Insurance Company: \_\_\_\_\_  
Policy #: \_\_\_\_\_ Policy Phone #: \_\_\_\_\_  
Policy Holder: \_\_\_\_\_  
Parent / Guardian: \_\_\_\_\_

On the reverse side list any and all allergies or special medical conditions your child may have. Also initial the photo release & read and sign the disciplinary code. Thank You.

# Special Instructions

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Photo Release

I do hereby consent and agree that First Baptist Church Fort Mill has the right to take photographs, videotape, or digital recordings of my student and to use these in any and all media. \_\_\_\_\_ (Parent/Guardian Signature)

If you have any questions regarding the photo release, please contact one of the youth pastors.

## Disciplinary Code

1. I will obey all rules set out before me by the adult sponsors.
2. I will not bring drugs, alcohol, tobacco, balloons, shaving cream (unless you shave) or anything that would hinder me or others from achieving God's best for us on an activity.
3. I will not harm any other person or their belongings.
4. Failure to comply with any or all of the rules above may result in your being sent home at your parents' expense.

## Signatures:

Parent/Guardian: \_\_\_\_\_

Student: \_\_\_\_\_

Date: \_\_\_\_\_