

# Parent/Guardian Consent Form, Medical Release Form and Media Release Form

## Mega Sports Camp 2018

Participant Name \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Phone Number where you can be reached during MEGA Sports Camp \_\_\_\_\_

Special Concerns (allergies, medications, medical conditions, etc.) \_\_\_\_\_

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

I, the undersigned parent/guardian, do hereby grant permission for my son/daughter, \_\_\_\_\_, to attend the **Mega Sports Camp 2018**.

*Printed Name of Student(s)*

I, the undersigned parent/guardian, do hereby grant permission for my son/daughter, named above, to attend the camp/clinic and participate in all activities including being transported to offsite activities. In order that my child may receive the proper medical treatment in the event that he/she may sustain injury or illness during **MEGA Sports Camp**, I hereby authorize the camp staff to obtain or provide medical treatment for my child for such injury or illness during the camp, and I hereby hold the camp staff and **Oak Park Baptist Church**, as well as its representatives, harmless in the exercise of this authority.

I further understand that there is always a possibility that my child may sustain physical illness or injury while at the camp. If this occurs, I hereby authorize the camp staff and representatives to refer my child to a medical treatment center (hospital, etc.) I further acknowledge and understand that I will be responsible for any medical bills that may be incurred on behalf of my son/daughter for physical illness or injury that he/she may sustain during the camp.

Understanding that there is always a possibility that my child may sustain physical illness or injury, I acknowledge and understand that my child is assuming the risk of such physical illness or injury by his/her participation, and I further release **Oak Park Baptist Church** and its representatives from any claims for personal illness or injury that my child may sustain during the camp. I further acknowledge and understand that my child will be responsible for his/her failure to abide by the rules and regulations of the camp.

I hereby irrevocably consent to and authorize the unrestricted use and reproduction of any and all photographs and/or video images which have been taken during the camp of my child for use within the scope of **Oak Park Baptist Church**. This consent is absolute and without limitations as to (1) the time within which any such photographs or video images must be used. (2) the nature of extent of their use, or (3) by whom they may be used.

Name of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_ Signature of Parent or Guardian \_\_\_\_\_

***\*This completed form is needed before participating in Mega Sports Camp.  
Please drop off at the Church Office or bring on June 4, 2018.***