



**MINISTRY ACTIVITY PARTICIPANT
(MINORS UNDER 18 YEARS OF AGE)**

*This form will be effective for participation in any Hodges Boulevard Presbyterian Church (HBPC) Ministry activities that begin on or after the date this document is signed ending on **August 1, 2021**.*

- 1. PARTICIPANT INFORMATION
- 2. AUTHORIZATION FOR MEDICAL TREATMENT
- 3. PHOTOGRAPHIC & REPROGRAPHIC RELEASE
- 4. PRE-INJURY WAIVER, RELEASE AND HOLD HARMLESS

PARTICIPANT INFORMATION (PLEASE PRINT LEGIBLY)

Last: _____ First: _____ Middle: _____

Date of Birth: _____ Age: _____ Grade: _____ Sex (√ one): _____ Male _____ Female _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____

Primary Email Address: _____

Father's Name: _____

Home Phone: _____ Cell: _____ Work: _____ Ext: _____

Mother's Name: _____

Home Phone: _____ Cell: _____ Work: _____ Ext: _____

In Case of Emergency, please contact: _____ Relationship to minor: _____

Home Phone: _____ Cell: _____ Work: _____ Ext: _____

2nd Emergency contact: _____ Relationship to minor: _____

Home Phone: _____ Cell: _____ Work: _____ Ext: _____

We, _____ & _____ are the parents or legal guardians ("Participant's Guardians") of _____, a minor child under 18 years of age ("Participant").

AUTHORIZATION FOR MEDICAL TREATMENT

Participant's Guardians authorize & consent to a member of the HBPC's Leadership Team, including a mission team member, camp leader or staff member (hereafter "HBPC Designee"), to administer general first aid treatment for any minor injuries or illnesses experienced by Participant. If the injury or illness is life threatening or in need of emergency treatment, Participant's Guardians authorize the HBPC Designee to summon any & all professional emergency personnel to attend, transport & treat Participant & to issue consent for any X-ray, anesthetic, blood transfusion, medication or other medical diagnosis, treatment or hospital care deemed advisable by & to be rendered under the general supervision of, any licensed physician, surgeon, dentist, hospital or other medical professional or institution duly licensed to practice in the state or country in which such treatment is to occur. It is understood that this authorization is given in advance of any such medical treatment but is given to provide authority & power on the part of the HBPC Designee in the exercise of his or her best judgment upon the advice of any such medical or emergency personnel.

Participant's Guardians personal responsibility for all medical bills & certifies that they have secured primary medical insurance for Participant. Further, should it be necessary for Participant to return home due to medical reasons, for disciplinary action, or otherwise, Participant's Guardians hereby assume responsibility for all related transportation &/or communication costs.

MEDICATION INFORMATION:

The following non-prescription medication may be available for dispensation. Please initial each medication listed to indicate that the church staff/volunteers may dispense the named non-prescription medication to your child should the need arise.

___ Tylenol ___ Advil ___ Bayer ___ Imodium A-D ___ Mylanta/Tums ___ Pepto-Bismol
___ Benadryl ___ Hydro-cortisone cream ___ Neosporin ___ Calamine Lotion ___ Bactine

If you would prefer, you may send your own products in original containers with instructions in a sealed zip-loc bag clearly labeled with your child's name with directions for dispensing and given to the church staff/volunteer. Please list these non-prescribed medications below.

In all cases, the recommended dosage of any medication will not be exceeded.

If after administering any of the above listed, or those I have provided, non-prescribed medication there is an adverse reaction, I give my permission to Hodges Boulevard Presbyterian Church to secure from any licensed hospital physician and/or medical personnel any and all medical services necessary. I recognize and acknowledge that there are certain risks of physical injury in connection with the administering of medication to my minor child. In consideration of HBPC administering medication to my minor child, I do hereby fully release or discharge HBPC, and its officers, agents, volunteers, and employees from any and all claims from injuries, damages and losses I or my minor child may have, arising out of, connected with, incidental to, or in any way associated with the administering of medication. I further agree to indemnify, hold harmless, and defend HBPC, and its officers, agents, volunteers, and employees from any and all claims resulting from injuries, damages and losses sustained by me or my minor child arising out of, connected with, incidental to, or in any way associated with the administering of medication.

I give permission for Hodges Boulevard Presbyterian Church's staff/volunteers to give the initialed non-prescription medications, or those I have provided, to my minor child as needed.

X _____
Signature of Parent/Guardian Date

MEDICAL HISTORY

Hospital Insurance: Yes ___ No ___ Name of Insured on Account: _____

Place of Insured's Employment: _____

Insurance Company: _____ Policy #: _____

Physician's Name: _____ Phone #: _____

Illnesses: (Please list all chronic illnesses and give details as needed)

Current Medications: (List all dosages and milligrams) _____

Allergies: (i.e. food, penicillin, etc.) _____

Previous operations/additional medical information: _____

PHOTOGRAPHIC AND REPROGRAPHIC RELEASE

By signing this document Participant's Guardians hereby gives Hodges Boulevard Presbyterian Church the absolute & irrevocable right & permission to use Participant's name & to use, reproduce, edit, exhibit, project, display, copyright, publish photographic images &/or moving pictures &/or videotaped images of Participant with or without Participant's voice, or in which Participant may be included in whole or in part, photographed, taped, videotaped, &/or recorded during any Youth Ministry Activity, & therefore to circulate the same in all forms & media for art, advertising, trade, competition, of every description and/or any lawful purpose whatsoever .

PRE-INJURY WAIVER, RELEASE, AND HOLD HARMLESS AGREEMENT

We realize and acknowledge that Participant's participation in a Hodges Boulevard Presbyterian Church ("HBPC") event, mission trip, ministry project, youth camp, field trip, sports activity or activity of any kind (collectively "Youth Activity") anywhere within the United States, in an international country & travel to & from a Youth Activity, includes many risks & possible dangers. We further acknowledge that a Youth Activity may expose Participant to accidents, disease, war, political unrest & inherently dangerous activities, including by general description & not by way of limitation, horseback riding, go - cart racing, swimming, water skiing, jet skiing, other water sports, hiking, archery, sports activities & any other activities in which youth may engage (collectively "Risks") . We have measured the Risks against the benefits of Participant participating in a Youth Activity & have determined that the benefits far outweigh the Risks.

In good & valuable consideration, including but not limited to Participant being allowed to participate in a Youth Activity, & to the fullest extent permitted by law, we on behalf of ourselves, heirs, executors, administrators & Participant unconditionally agree to waive, release & hold harmless HBPC, its trustees, officers, directors, employees, agents, volunteers, licensees, successors, legal representatives, Hodges Boulevard Presbyterian Church staff members, & assigns (collectively "HBPC Releases") from any & all liability, claims, demands & causes of action for personal injury, sickness, disease, death, damages, property damage & expenses of any nature (collectively "Claims"), incurred by us &/or Participant, arising out of or related to in any way to a Youth Activity, including negligence &/or fault, in whole or in part, of the HBPC Releases. This Pre -injury Waiver, Release, and Hold Harmless Agreement applies to all Claims that exceed insurance coverage payments, if any, received by HBPC. If no insurance payments are received by HBPC, then this Hodges Boulevard Presbyterian Church Youth Activity Form For Minors Under 18 Years Of Age Authorization For Medical Treatment and Photographic And Reprographic Release And Pre -injury Waiver, Release And Hold Harmless Agreement ("Youth Activity Form") applies to all Claims. However, there is no obligation, express or implied, for HBPC to procure insurance coverage to cover any potential Claim. HBPC will use reasonable efforts to obtain commercially reasonable & available commercial liability insurance. HBPC affirms that the safety & well -being of all Participants is of utmost importance.

Participant's Guardians have considered the ability to obtain independent insurance coverage & certify that we have secured primary medical insurance for Participant or have other means to cover the expense of any loss, damage or injury, as described above, & we accept the Risks & associated expense.

To the extent any of the terms or provisions of this Youth Activity Form is deemed unenforceable by a court of competent jurisdiction or arbitration panel, then the terms or provisions that are deemed unenforceable shall be stricken & the remaining terms & provisions shall remain in full force & effect to effectuate the intent of the parties for this Youth Activity Form to be an enforceable non - commercial pre -injury release of a minor under Florida common law.

This form will be effective for participation in any HBPC Youth Activity that begins on or after the date this document is signed and notarized through and ending on **August 1, 2021**.

Participant's Guardians acknowledge that they are the parents &/or legal guardians of Participant, have read & understood this Youth Activity Form in its entirety & have signed & delivered it voluntarily

Signature of Parent(s) or Guardian(s)

Printed Name of Parent(s) or Guardian(s)

Date

