

**VIEW YOUTH EVENT RELEASE FORM**  
**Spring Retreat 2023 • March 15-16**

STUDENT'S FULL NAME

\_\_\_\_\_

GUARDIAN PHONE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

INSURANCE CO \_\_\_\_\_ POLICY \_\_\_\_\_

GROUP \_\_\_\_\_ INSURANCE# \_\_\_\_\_

**MEDICAL INFORMATION:**

Current Medications \_\_\_\_\_

Date of last tetanus shot \_\_\_\_\_ (if unsure, secure booster prior to event)

Medicine Allergies \_\_\_\_\_

Food Allergies \_\_\_\_\_

Are you subject to: Fainting \_\_\_ Heart Issues \_\_\_ Epilepsy \_\_\_ Diabetes \_\_\_ Appendix Out \_\_\_

Any physical problems that might hinder activities? \_\_\_\_\_

As the participant, parent and/or guardian (if under 18 years of age) of said member, I hereby acknowledge that he/she is presently under my care, custody and control. In the event there arises any emergency needing medical attention, I hereby consent and give my permission to Pleasant View Baptist Church's Youth Ministry, or its representatives, or any attending physicians, to make such decisions and to perform such medical treatment, which may in their sole discretion be necessary and proper under the circumstances. As the participant, parent and/or guardian of said member, I hereby do release, acquit, discharge to hold harmless Pleasant View Baptist Church or its representatives or any attending physician from any and all actions, damages, or liabilities arising out of the treatment of any sickness or accident incurred by above said participant during time-away while on any church activities.

\*Please Note:

I give Pleasant View Baptist Church's Youth Ministry the right to use video or still shot photography of myself in any appropriate promotional or publicity use.

PARENT SIGNATURE

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
GUARDIAN PRINTED NAME