

THE UNITED CHURCH OF CHRIST IN MEDFIELD
PERMISSION FORM/MEDICAL RELEASE

I/we give my permission for the individual named below to attend the following activity and to be driven in a car/van to and from this event by a licensed adult (at least 25 years of age). I/we understand that there are inherent risks involved in any such activity, and I/we hereby release The United Church of Christ in Medfield, its staff and volunteer workers from any and all liability due to any injury, loss, or damage to person or property that may occur during the course of my child's involvement in said activity.

Youth Soup To Go Ministry for October, 2006 to May, 2007

My signature also gives my permission to the adult leaders/chaperones to act on my behalf to secure full emergency medical treatment should they not be able to reach me at one of the numbers provided below. I understand that any and all medical expenses incurred are my responsibility and that there is not medical insurance coverage provided by The United Church of Christ in Medfield.

Activity Participant Name _____ Date of Birth _____

Insurance Company _____ Policy Number _____

Name of primary insured _____

Name of Physician _____ Phone Number _____

Allergies/Conditions _____

Parent/guardian contact numbers:

Name _____ Phone # _____ Cell # _____

Name _____ Phone # _____ Cell # _____

I/we grant permission with confidence that our son/daughter will cooperate with the ground rules for appropriate behavior.

Signature of Parent/guardian

Date

Adult Leaders/Chaperones:

Wendy Ludwig

Tom Infantino

Bill Marshall

Terry Brennan

Bill Sobo

Amy Marshall

Gary Greaves

Wendy Greaves

All adult drivers - to be determined