

Super Summer 2021- KFBC, Kearney MO, 2021 Medical & Release Form

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|------------------|
| Participant Name |
| Home Phone |
| Cell Phone |
| Address |
| City State Zip |
| Date of Birth |
| School Grade |

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|--|
| Parent / Guardian |
| Home Phone |
| Cell Phone |
| Address |
| City, State, Zip |
| Work Phone |
| |
| Doctor's Name |
| Doctor's Phone |
| |
| Emergency Contact – if parent/guardian cannot be reached |
| Emergency contact |
| Home Phone |
| Address |
| City, State, Zip |
| Work Phone |
| Cell Phone |
| |
| Insurance Info |
| Insurance Company |
| Group Number |
| Group Name |
| |

Trip Details

July 26th- 30th

Departure - Meet Monday in church gym @ 10am (bring sack lunch)

Arriving Back- Friday 3pm (could be earlier)

Signature of parent/guardian

Date

Kearney First Baptist Church
Kearney, MO

kearneyfbc.com

303 S. Grove St, Kearney, MO 64060

Health History
Please list any Special Medical Conditions or Food Allergies

Last Tetanus Shot _____

Medications to be taken (list with directions)

Medication Allergies? List if any

May be given as necessary:

Aspirin Yes _____ No _____

Tylenol Yes _____ No _____

Ibuprofen Yes _____ No _____

Any Specific Activities

Encouraged _____

Discouraged _____

I hereby give consent in advance to the designated Adult Leaders and to the physicians or hospitals selected by them to render first aid treatment or deny treatment as in their judgment is reasonably necessary, including, but not limited to, hospitalization, diagnosis including taking specimens, and x-rays, giving blood transfusions, and medications, anesthesia, and surgery for my dependent listed above. I understand that the Leaders will attempt to contact me before securing medical treatment, but that this consent is given in case I am not available in an emergency.

I release all leaders and staff affiliated with Missouri Baptist Convention or one of the participating churches from any and all claims, loss, cost, damage, or expense arising out of or from any accident or other occurrences causing injury to any person or property.

For Emergency Use Only

Trip Supervisor

Tyson Branizor 816-348-3361

Additional Camp Contact

Laura Wood 816-673-8862

TRANSPORTATION RELEASE

Applies to students only

I give permission for my youth to be transported to **Salina, Kansas to attend Camp Super Summer at the Webster Conference Center** in a church, rental, or private vehicle.

Parent Initials _____

DISCIPLINE RELEASE

Applies to students only

At all events organized by the church, including transportation to and from such events, we expect each student to conform to these rules of conduct:

No pranks, No possession or use of alcohol, tobacco, or drugs, No fighting, weapons, fireworks, lighters, or explosives, No offensive or immodest clothing, No public display of affection (PDA), Respect property, Respect one other, staff, and adult leaders, Respect and comply with all event schedules and rules.

I have read and agree to follow the rules and guidelines set by Kearney First Baptist Church, and expect my child to abide by these guidelines. In the event of misconduct, I realize and agree to that the student may be sent home by the staff at the expense of the parent.

Parent Initials _____ Student Signature _____

INSURANCE RELEASE

Applies to all traveling

I realize the church insurance begins where the individual health and accident policy terminates. It is only valid when all other insurance has been extended to its limits.

PERSONAL BELONGINGS RELEASE

Applies to all traveling

I realize that the church or its sponsors are not responsible for personal belongings.

Parent Initials _____

GENERAL RELEASE

Applies to all traveling

The undersigned or a member of the immediate family of the undersigned give our consent for the participant to attend events being organized by Kearney First Baptist Church. The undersigned or a member of the immediate family of the undersigned realizes that the participant may incur personal injury or bodily damage while participating in such activities, and acknowledge that the church, it's officers, directors, employees, agents, or any other parties volunteering on behalf of the church, shall be held harmless from all actions, claims, costs, expenses or damages of any kind, growing out of or related to any activities of the church. The undersigned or a member of the immediate family of the undersigned further acknowledge this is a full and complete release for all injuries and damages which the participant may sustain as a result of participating in this activity.

I, _____, being the legal guardian of _____ give my permission for him/her to participate in the 2021 Super Summer Camp in Salina, Kansas July 26-30.

Date _____ Parent / Guardian Signature _____