



2023 MEDICAL RELEASE FORM

Minor's Full Name: _____

Home Address: _____

Date of Birth: ____/____/____ Phone Number: (____) _____ - _____

Emergency contact person(s): _____

Emergency contact phone number(s): _____

Insurance Company: _____ Policy #: _____

Please list any known medical allergies, medications currently being taken, existing medical problems, or other pertinent information:

I, _____ hereby consent for _____
(PRINTED NAME OF PARENT OR LEGAL GUARDIAN) (PRINTED NAME OF MINOR)

to attend and participate in scheduled events and activities by the Kalkaska Church of Christ for the year 2023. I understand that, in the event medical treatment is required, every effort will be made to contact me. However, if I cannot be reached, I give permission to the staff or youth leaders to secure the medical services (including anesthesia, emergency room services, ambulance services, and hospitalization) necessary for my child's wellbeing.

Signed, _____ Date: _____
(SIGNATURE OF PARENT OR LEGAL GUARDIAN)



2023 Code of Conduct Form

If a youth member breaks any of the below outlined rules, it will warrant immediate dismissal from the youth event. The parent/guardian will need to retrieve the youth member immediately. If any damages or fines were incurred, the cost to cover them will fall on the parent/guardian. KCC (Kalkaska Church of Christ) is not to be held liable. It should also be stated that if a rule outlined by a venue (outside of what is listed below) is broken, causing the youth member to be removed from the venue, the parent/guardian will need to immediately retrieve the youth member.

- No Weapons (including but not limited to: Guns, Knives, Explosives).
- No boys in girls' bedrooms or bathrooms. *
- No girls in boys' bedrooms or bathrooms. *
- No sexually inappropriate behavior and/or gestures. *
- No wandering off from designated areas. *
- No drugs or alcohol, including smoking and vaping.
- No physical violence against yourself or others.
- No bullying. *

* Any occurrence will be evaluated by Ephraim and/or other leaders on a case-by-case basis.

(PRINTED NAME OF PARENT OR LEGAL GUARDIAN)

(SIGNATURE OF PARENT OR LEGAL GUARDIAN)

Date: _____

(PRINTED NAME OF YOUTH MEMBER)

(SIGNATURE OF YOUTH MEMBER)

Date: _____