

# Eden Prairie Presbyterian Church Student Ministries

## Registration Health Information

### Effective: July 2010—August 2011

*Please Print In Ink*

Name \_\_\_\_\_ Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ Male  Female   
Last First Middle Int.

Fall of '10 School \_\_\_\_\_ Fall of '10 Grade \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Phone (H) \_\_\_\_\_ Phone (W) \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Second Parent \_\_\_\_\_ Phone (H) \_\_\_\_\_ Phone (W) \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

Alt. Emergency Contact \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

Parent E-mail Address \_\_\_\_\_ Student E-mail Address \_\_\_\_\_

Medical Insurance Carrier \_\_\_\_\_ Policy # \_\_\_\_\_ Group # \_\_\_\_\_

Carrier Address \_\_\_\_\_ Name of Person Insured \_\_\_\_\_

Insured Person's Place of Employment \_\_\_\_\_

Name of family physician \_\_\_\_\_ Phone \_\_\_\_\_

Name of dentist/orthodontist \_\_\_\_\_ Phone \_\_\_\_\_

**Healthy History (Check. Give approx. dates.)**

Frequent Ear Infections     Diabetes     Bleeding Disorders  
 Heart Defect/Disease     Asthma     Mononucleosis  
 Seizures     ADD/ADHD     Downs Syndrome  
 Tourettes Syndrome     Chicken Pox     Measles  
 Mumps

**Allergies (dates not needed)**

Hay Fever     Penicillin  
 Ivy Poisoning, etc.     Insect Stings  
 Other \_\_\_\_\_  
 Drugs (specify) \_\_\_\_\_

Chronic/recurring illness/medical conditions including mental illness (depression, anxiety, etc.) \_\_\_\_\_

Dietary Restrictions \_\_\_\_\_

**Current Medications (List all prescriptions, OTC and herbal)**

Medication Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Reason for taking: \_\_\_\_\_

Medication Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Reason for taking: \_\_\_\_\_

Blood type (if known) \_\_\_\_\_ Are all immunizations current? (MMR, tetanus - every 10 years, hepatitis) Yes  No

Describe your students swimming ability: Beginner  Intermediate  Lifeguard certified

Any other information you feel the leaders should know in advance about your student. \_\_\_\_\_

**For your information, these are our rules of conduct expected from each student:**

- Respect another, staff, and leaders
- No fighting, weapons, fireworks, explosives
- No offensive or immodest clothing
- Respect and comply with event schedules
- No alcohol, drugs, tobacco
- No students permitted to drive for events
- No boys in girl's sleeping quarters & visa versa
- No cell phones or portable entertainment systems
- No lighters permitted
- Participation with the group expected
- No 2-piece swim suits or Guys Speedos
- Respect property

**Failure to comply with these expectations could result in your child being sent home at your expense.**

My child has permission to attend all church sponsored Higher Ground activities as listed in calendars and/or in Eden Prairie Presbyterian Newsletters, including but not limited to the following: cook-outs, boating, water-skiing, swimming, basketball, roller skating, rollerblading, games in the park, soccer, paintball, broomball, ice-skating, volleyball, softball, baseball, camping, downhill skiing, snow-boarding, hiking, biking, concerts, Bible studies, golfing, miniature golf, hayrides.

*Note: If it is your desire to limit your child's participation in any event, please submit your wishes in writing to Eden Prairie Presbyterian Church **prior to that event.***

Parent(s)/guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**(Wait, there's more on the back!)**

# EDEN PRAIRIE PRESBYTERIAN CHURCH STUDENT MINISTRIES WAIVER AND RELEASE FROM LIABILITY EFFECTIVE JULY 2010—AUGUST 2011

I (We) acknowledge that my child's participation in the Eden Prairie Presbyterian Church youth program is voluntary and may require involvement in activities that require traveling or physical exertion. Such activities may include, but are not limited to: outings, athletic games, local excursions, and meetings. I (We) acknowledge that my child's participation in any Eden Prairie Presbyterian Church youth activity presents risks that my child may suffer property damage, bodily injury, or death. Therefore, in consideration of my child's being allowed to participate in the Eden Prairie Presbyterian Church youth program activities, I (we) agree to the following:

- \_\_\_\_\_ Initial Eden Prairie Presbyterian Church is not responsible for the loss or theft of personal belongings.
- \_\_\_\_\_ Initial Misconduct may result in transportation home from an activity at parents' expense. A student dismissed for a disciplinary reason will not receive a refund of the activity fee.
- \_\_\_\_\_ Initial I understand and authorize that my child's image may be photographed or filmed and used in video presentations and/or printed publications of Eden Prairie Presbyterian Church Ministries including the internet website.
- \_\_\_\_\_ Initial I hereby take the following action for my child, myself, my executors, administrators, heir, next of kin, successors and assigns: (A) **I waive, release, and discharge** from any and all claims or liabilities for death or personal injury damages of any kind, which arise out of or relate to my child's participation in Eden Prairie Presbyterian Church's Youth activities, the following person, or entities: Eden Prairie Presbyterian Church, it's Senior Pastor and Youth Pastor, Team Leaders, employees, volunteers, representatives, subcontractors and agents of any of the above: B) **I agree not to sue** any of the persons or entities mentioned above for any of the claims or liabilities that I have waived, released or discharged herein except in the case of gross negligence on the part of Eden Prairie Presbyterian Church, EPPC staff or volunteers and: C) **I indemnify and hold harmless** the person or entities mentioned above from any claims made or liabilities assessed against them as a result of my child's actions. **I hereby assume the risks of my child participating in all Eden Prairie Presbyterian Church Higher Ground activities.**
- \_\_\_\_\_ Initial The undersigned \_\_\_\_\_ (parent/guardian), the parent and natural guardian or legal guardian of \_\_\_\_\_ (minor's name) hereby executes this document for and on the behalf of the minor named herein. I agree to indemnify and hold harmless the person or entities mentioned above for any claims or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the minor in the execution of the Waiver and Release.
- \_\_\_\_\_ Initial I hereby authorize any licensed physician, emergency medical technician, hospital or other medical or health care facility to treat the minor named herein for the purpose of attempting to treat or relieve any injury received by said minor. I authorize any such Medical Provider to perform all procedures deemed medically advisable in attempting to treat or relieve any such injuries. I consent to the administration of anesthesia as deemed advisable. I realize and appreciate that there is a possibility of complications and unforeseen consequences in any medical treatment, and I assume any such risk for and on behalf of myself and said minor. I understand that attempts will be made to contact me in the most expeditious way possible. Permission is also granted to Eden Prairie Presbyterian Church representative to provide the needed emergency treatment to the student prior to his/her admission to a medical facility.
- \_\_\_\_\_ Initial I give my permission to the staff to administer Tylenol/Acetaminophen, Ibuprofen, Benadryl/ Diphenhydramine or over the counter antacids as needed.

Child's Name \_\_\_\_\_  
Parent (s)/Guardian Signature \_\_\_\_\_