



601 East Boundary St.  
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### Youth Ministry (Grades 7-12) - Medical Emergency/Release Information Sheet

Student Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Address: \_\_\_\_\_ Grade 2024-25: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Student email: \_\_\_\_\_ Student Cell Phone: \_\_\_\_\_

Parent/Guardian Name(s) and email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone #1: \_\_\_\_\_ Cell Phone #2: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Medications (prescription and OTC): \_\_\_\_\_

\_\_\_\_\_

Allergies/Allergic Reactions: \_\_\_\_\_

Other Pertinent Health Info: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Insurance Provider: \_\_\_\_\_ Policy #: \_\_\_\_\_

*I, the undersigned parent or guardian of child named above, hereby authorize emergency medical, dental, health or hospital services be rendered to my child upon consent of a Grace Church Perrysburg pastor, staff member or designated advisor. The purpose of this authorization is to permit my child to receive emergency medical attention, when needed, while involved in activities connected with Grace Church Perrysburg youth group when neither I nor my emergency contact are available to give such consent.*

\_\_\_\_\_  
Parent/Guardian Signature Date

*I, as the parent/legal guardian of the above-named child, release, discharge and hold harmless from liability Grace Church Perrysburg, and its employees, agents, and all persons acting on behalf of such church, for any and all claims relating in any way to the above-named child's participation in youth ministry activities between September 1, 2024 and August 31, 2025. I also agree to indemnify the church and its employees, agents and all persons acting on its behalf for any liability or damages relating to the same. I understand that this is a legally binding release and agreement to indemnify.*

\_\_\_\_\_  
Parent/Guardian Signature Date

*I, as the parent/legal guardian of the above-named child, grant Grace Church Perrysburg permission to use my child's photo in print and online publications while participating in youth ministry activities between September 1, 2024 and August 31, 2025.*

\_\_\_\_\_  
Parent/Guardian Signature Date

*I am over the age of 18 and agree to release, discharge and hold harmless from liability Grace Church Perrysburg, and its employees, agents and all persons acting on behalf of such church, for any and all claims relating in any way to my participation in youth ministry activities between September 1, 2024 and August 31, 2025.*

\_\_\_\_\_  
Signature Date

*I am over the age of 18 and grant Grace Church Perrysburg permission to use my photo in print and online publications while participating in youth ministry activities between September 1, 2024 and August 31, 2025.*

\_\_\_\_\_  
Signature Date