

HEALTH CONSENT AND WAIVER

This waiver is effective for one year following the date it is signed.

Andover United Methodist Church, 1429 N. Andover Rd. Andover KS 67002

I am the parent/guardian of _____, and do hereby give my consent for my child/youth to participate in the activities of Andover United Methodist church.

I do further waive any claim for liability or damages against Andover United Methodist Church of Andover, Kansas, any of its employees, or any person or persons transporting or assisting in any activity for any damage or injury which may be sustained by my child during or in transit to any activity.

Further, in the event of an accident, illness or emergency medical situation during the course of an activity or in transit to an activity involving my child/youth, I hereby authorize the sponsors to obtain medical assistance and treatment for my child on my behalf. It is also agreed that AUMC will be repaid any medical expenses incurred on their behalf.

Child/youth's full name _____ Date of Birth _____ Grade _____

Address/City/State/Zip Code _____ Phone _____

Parent's Work Phone _____ Cellular Phone _____ Pager # _____

Parent's Work Phone _____ E-mail address _____

Other person to call in case of emergency _____

Relationship _____ Phone _____

Do you give approval for photographs to be taken of your child/youth? Yes/No

Please list (put "n/a" if not applicable to your child):

Drug Allergies _____
(Prescription and nonprescription)

Dietary Restrictions _____

Prescription Medications taken currently _____

Chronic Illness (asthma, etc.) _____

Date of last Tetanus shot _____ History of sleep walking? Yes / No

Other medical information which might be necessary in an emergency _____

Family Physician _____ Phone _____

Health Insurance Co. _____ Policy # _____

Adult Sponsors may administer the following medications. *(Please circle all that apply):*

Aspirin Tylenol Advil Benedryl Others _____

Parent/Guardian name(s) 1. _____ 2. _____

Parent/Guardian Signature(s) 1. _____ 2. _____

Date _____