

Summit Point Church Student Ministries Event Participation Form

June 1, 2021 – May 31, 2022

I/We give Consent for ______ (name of minor) to attend any Student Ministries events being sponsored by Summit Point Church from June 1, 2021 through May 31, 2022.

In the event that he or she is injured while under the care of Summit Point Church and its representatives and requires the attention of a doctor, I hereby consent to and will be responsible for any reasonable medical treatment as deemed necessary by a licensed physician.

I/We further agree to hold the licensed physician, the medical facility, Summit Point Church and its representatives free and harmless of any claims, demands, or suits for damages arising from the authorization and provision of such medical treatment.

I/We understand the nature of the events and do hereby release Summit Point Church and its representatives from any liability due to accident or injury incurred by my child.

Signed: _____

Every possible safety precaution will be taken by those in charge and every possible attempt will be made to contact the parent or guardians immediately in the event of injury or other emergency!

Grade (2021/2022 School Year)	Gender M / F D.O.B//_	
Special Medications or Allergies		
Name of Parent or Guardian		
Address		
City	State Zip	
Home: ()	Cell: ()	
Emergency Contact	Phone: ()	
Health Insurance Provider and #		
Doctor's Name	Phone: ()	