## 2018-2019 Grace Church Aurora AWANA TREK & JOURNEY EMERGENCY MEDICAL RELEASE & RELEASE OF LIABILITY/PERMISSION

PLEASE RETURN WITH REGISTRA	ATION AND PLEASE PRIN	VΤ				Today's date	
Participant's Full Name	Nickname	Date	of birth		AGE	School Grade	
Street Address	City		State	Zip			
Father's Full Name	Mother's Full Name	<del></del>					
Father's Work Phone	Mother's Work Phone	Parents	' Home Pho	ne			
Father's Cell Phone	Mother's Cell Phone	Particij	oant's Cell P	hone			
Parent E-mail Address	Participant's E-mail Addres	ss					
EMERGENCY MEDICAL I	NFORMATION/RELEA	<u>SE***</u>					
Allergies							
Medications							
Other medical conditions							
Name of Insurance/Health Plan		Policy/	Account Nu	mber			
Family Physician	Phon	ne e		_			
Date of last tetanus shot	Hosp	oital of choice		_			
Person other than parent to be	notified in an emergency si	tuation if parent can	not be not	ified:			
Name	Relat	tionship		Phone			
In the event of an emergency, I on behalf of my above named of hospital care advised and super laws of the state where the serve that I will be contacted as soon such treatment.	child to any X-ray examinativised by a physician, surgerices are rendered either at a	tion; medical, denta con, or dentist (as ap a doctor's office or	l, or surgion propriate) in any hos	cal diag license pital. I	nosis; tre d to prac further u	eatment; and tice under the inderstand	
RELEASE OF LIABILITY The undersigned does hereby r directors, employees, agents, re illness or death, as well as prop son/daughter that occur within	epresentatives, and volunted perty damage and expenses	ers from any and all of any nature whats	liabilities oever whi	or clain ch may	ns for pe be incur	rsonal injury, red by my	
PERMISSION My child, as listed above, has perfectly Grace Church Aurora Awana the instructions of the leader(s)	within Colorado. It is unde						
Signature of parent/guardian	Relations	hip		Date			
Important!!!!!							
Witness (Must be at least 2	1 years of age and not a	relative)	Sig	ned th	is date		

\*\*\*It is your responsibility to inform Mrs. Cress of any changes to this information during the club year.