

SCC KIDS MINISTRY 2022 Waiver

Filed for the Calendar year 2022

(Please Print Clearly)

Child Information:

Last Name: _____ First Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: () _____ Cell Phone: () _____
Age: _____ _Sex: _____ Grade: _____
This is my child's first time attending a SCC KIDS event: Yes / No

Parent/Guardian Information:

Last Name: _____ First Name: _____
Relationship to student: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: () _____ Cell Phone: () _____
Work Phone: () _____
Email: _____
Emergency Contact: _____
Home Phone: () _____ Cell Phone: () _____

For any questions or concerns, please contact Pastor Melissa Meacham
Melissa@southcoastchristian.com

Medical Record & Release

Child Information:

Last Name: _____ First Name: _____

Health Problems or Medical Issues:

Emergency Contact:

Home Phone: (____) _____ Cell Phone: (____) _____

Food Allergies:

Drug Allergies:

Polio Vaccination: Yes / No

Date of last Tetanus shot: _____ / _____ / _____

Activity Restrictions:

Regular Medications:

Insurance Company:

Insurance Company Phone: _____

Policy Number:

Name of Policy Holder:

(Please attach copy of Insurance Card)

In case of emergency:

In the event of an emergency, I, _____, here by authorize the sponsors to obtain for my child (me) any medical care they deem necessary for immediate care and agree that I will pay all such medical services rendered. I hereby release **South Coast Christian, and/or SCC KIDS**, agents, employees, directors, officers, and volunteer assistants from any and all liability whatsoever arising out of any injury, damage, or loss which may be sustained by the aforementioned student during involvement with South Coast Christian .

Publicity Release:

I, _____, hereby grant permission for **South Coast Christian, and/or SCC KIDS**, to photograph/video my child during event activities and to use the photographs/video/website in **South Coast Christian, and/or SCC KIDS**, audio-visual and printed materials, without compensation or approval rights.

Parent/Guardian Signature:

Date: