

2022
Crossville SDA Church
VACATION BIBLE SCHOOL
Medical Authorization

I, _____, being the parent/legal guardian and having legal custody of _____, a minor, do hereby consent to said child participating in **2022 Vacation Bible School** activities of the Crossville Seventh-day Adventist Church in Crossville, TN. I do hereby release, discharge and exonerate the Seventh-day Adventist Church, and all persons acting as teachers or sponsors on said activities from any liability whatsoever resulting from personal injury to said minor or damage to property of said minor which may occur at said activities or connection therewith.

I, do hereby certify that I assume full responsibility and liability for any acts committed by said minor during activities related thereto resulting in injury or damage to the property of another.

I, do hereby acknowledge that I understand that this release is being relied upon by the Crossville Seventh-day Adventist Church, and teachers or sponsors accompanying the children on said trips and activities; and without this instrument being executed by me, said minor would not be permitted to attend field trips nor engage in activities related thereto.

I, do hereby authorize the officials of Seventh-day Adventist Church to contact directly the person named in this authorization, and do authorize

_____ or _____
(Physician) (Hospital)

to render such treatment as may be deemed necessary in an emergency, for the health of said child. In the event physicians, other persons named in the authorization or parents cannot be contacted, the church officials are hereby authorized to take whatever action is deemed necessary in their judgment, for the health of the aforesaid child. I will not hold the Seventh-day Adventist Church financially responsible for the emergency care and/or transportation for said child.

Parent/Guardian Signature: _____

Date: _____