



# EMERGENCY INFORMATION / RELEASE FORM

## In case of Emergency please contact:

Parent/Guardian's Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### Children covered by this release:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Medical Release:

If the parent or legal guardian(s) of child(ren) listed above cannot be reached at the time of an emergency and if, in the judgment of the church staff, immediate observation or treatment is urgently required I authorize and direct the church staff to secure necessary emergency medical attention. I understand that I will assume full responsibility for the payment of any services rendered.

\_\_\_\_\_  
Signature of Parent/Guardian Date

### Photo Release:

I grant permission for the use of photographs or electronic images of my child(ren) taken by or on behalf of Northminster Presbyterian Church for promotional/informational purposes, church publications and programming materials, including the church website.

\_\_\_\_\_  
Signature of Parent/Guardian Date

I do **not** grant permission for photographs or electronic images of my child(ren) to be published by Northminster Presbyterian Church.

\_\_\_\_\_  
Signature of Parent/Guardian Date

**Other Adult Pick Up Authorization:** I give permission for my son/daughter to be picked up from Northminster Presbyterian Church Vacation Bible School by the following persons:

- 1. \_\_\_\_\_ Phone contact \_\_\_\_\_
- 2. \_\_\_\_\_ Phone contact \_\_\_\_\_