

NORTHTOWNS PRESBYTERIAN YOUTH
Basic Information & Permission Form

PART I: Youth Information

Which church does youth attend? (circle) North University Kenmore
Youth Name: _____ Date of Birth: _____
Youth cell number: _____ E-mail: _____
Address where youth lives: _____
School: _____ Grade (Fall 2017): _____

PART II: Family Information

Parent/Guardian 1 - Name: _____ Relation: _____
Cell phone number: _____ Alternate phone: _____
E-mail: _____
Address (if different from youth): _____

Parent/Guardian 2 - Name: _____ Relation: _____
Cell phone number: _____ Alternate phone: _____
E-mail: _____
Address (if different from youth): _____

PART III: Youth medical Information and release

Physician's Name _____ Phone # _____
Medical Insurance Company _____ Policy # _____
List medication currently being taken _____

List known allergies (please give details on reaction and management of reaction) _____

Special Dietary Needs: _____

Consent for Emergency Treatment: I understand that in the event of an emergency, every reasonable attempt will be made to contact me at the phone number(s) listed above. If however, attempts to contact me are unsuccessful, I, the undersigned, legal guardian of the minor listed above, do hereby authorize the leaders on the Northtowns Presbyterian Youth Group as my agents to consent to any diagnostic and/or surgical procedures or any other medical treatment which is deemed advisable by, and is rendered under the general or specific supervision of any licensed physician and surgeon (on the staff or engaged by any hospital or any other duly licensed entity), whether such diagnosis or treatment is rendered at the office of said physician or hospital. It is understood that his authorization is given in advance of any specific need for treatments by is given to provide authority on the part of aforesaid agent(s) to give specific consent to any and all such procedures, treatment or other hospital care which the physician or hospital in the exercise of his, her or its best judgment.

Authorized Signature _____ Date _____

PART IV: Permission & Releases

Please read and initial each of the three releases below. If you do NOT wish to agree to one or all of the releases, please place a Ø symbol in the "initial here" box.

Permission to participate: As an authorized parent or legal guardian of the youth named in section I of this form, I hereby give my permission for my youth to participate in Northtowns Presbyterian Youth Group sponsored events activities, and trips. (Initial here: _____)

Permission to travel: As an authorized parent or legal guardian of the youth named in section I of this form, I hereby give this youth permission to travel with Northtowns Presbyterian Youth group to and from youth group-sponsored events, activities, and trips. (Initial here: _____)

Photo release: As an authorized parent or legal guardian of the youth named in section I of this form, I hereby give consent to and authorize Northtowns Presbyterian Youth (hereafter "the youth group") and/or include my youth in any photographs of other persons, to own the copyright in the same, in its name, to use and reuse, publish and republish the same in whole or in part, individually or in conjunction with any printed matter or use on the Internet, in any and all media now or hereafter known, for business and promotional purposes without restriction, including for advertising or for purposes of proselytizing. Moreover, I give the youth group the perpetual, royalty-free right to use these photos on the church's website.

I understand that the church's website will likely have a large audience and that my youth's photo(s) will be available to the general public through Internet access. I further understand that the youth group assumes no liability or responsibility whatsoever concerning any consequences of such use. I also understand that these photos of children under 18 that are posted on the webpage will NOT include first or last names of individuals for identification purposes. Moreover, if I give written notice to the youth director that I wish to change this decision, or if I object to any particular photo of my youth that is on the Church's website, then that picture will be removed as soon as possible. Finally, I state that I have the right to give this permission because I am the youth's parent or legal guardian.

Given all of the above, I hereby release and discharge Northtowns Presbyterian Youth, North Presbyterian Church Williamsville, University Presbyterian Church, and Kenmore Presbyterian Church from any and all claims or causes of action arising out of or in connection with its use of the photographs, including without limitation any and all claims under N.Y. Civil Rights Law #50. (Adopted from North Presbyterian Church) (Initial here: _____)

Signature: As an authorized parent or legal guardian of the youth named in section I of this form, I hereby agree to and claim as valid all of the above permissions and releases that bear my initials. I do NOT agree to nor claim as valid any of the above permissions and releases that I have written the Ø symbol in the "initial here" box.

Authorized signature: _____

Date: _____