

Name _____ Grade _____

Permission for Any Church-Related Function and Consent for Medical Treatment

The undersigned hereby gives permission for _____, a minor child, to attend any church-related function of Living Streams Church. In the event of an emergency involving said minor, permission is hereby granted for Living Streams Church personnel to consent to any x-ray examination, anesthetic, medical, or surgical diagnosis or treatment and hospital care to be rendered to the minor under the general or special supervision and on the advice of any physician or surgeon licensed to practice in any state, and to consent to any x-ray examination, anesthetic, dental, or surgical diagnosis or treatment and hospital care to be rendered to the minor by any dentist licensed to practice in any state, and church personnel shall not be held personally liable. This consent for any church-related function and medical treatment shall terminate on the 18th birthday of said minor which is ____/____/20____, or unless otherwise revoked by parent or legal guardian in writing.

STATE OF ARIZONA, COUNTY OF MARICOPA

Signature of Parent or Legal Guardian
(sign in presence of Notary Public)

Subscribed and sworn to before me

this _____ day of _____, _____

Address

by _____
(print your name)

City State Zip

Notary Public: _____

(_____) _____

My Commission Expires: _____

Area code & phone number

Child's Name: _____ Date of Birth: _____

Parent's Name: _____ Day Phone: (_____) _____

Nearest Relative/Neighbor _____ Phone: (_____) _____

Health Insurance Provider: _____ Plan # _____

Group # _____ Policy/ID# _____ Family Physician: _____

Date of last tetanus shot: _____ Date of last measles shot: _____

My child may take: Tylenol Advil Pepto Bismol Antacid

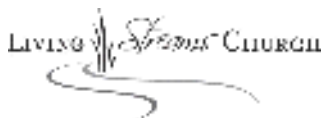
My child has the following allergies: _____

Special medical instructions: _____

PHOTO RELEASE (For pictures taken during any church activity)

I hereby grant Living Streams Church permission to use the above named child's likeness in photograph(s)/video in any and all of its publications and in any and all other media, whether now known or hereafter existing, controlled by Living Streams Church, in perpetuity, and for other use by the Church. I will make no monetary or other claim against Living Streams Church for the use of the photograph(s)/video.

Signature of Parent or Legal Guardian



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