

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

State of _____)

) ss

Parish of _____)

I, the undersigned, a notary public, whose commission by the above state expires on _____, do hereby certify that the above named signatory(ies), determined by me to be the same person(s) whose name (s) is (are) subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged having signed said instrument as the free and voluntary act of said signatory(ies) for the uses and purposes therein set forth. This certification is given under my hand and Notarial Seal this ___ day of _____, 20__.

Notary Public

MEDICAL INFORMATION AND WAIVER
STUDENT MINISTRY OF WOODLAND PARK BAPTIST CHURCH
Hammond, LA (985) 345-9101

Name _____ Sex _____ Date _____

Address _____
Street/Box _____ City _____ State _____ Zip _____

Birthdate _____ Parent/Guardian _____ Phone: _____ H _____ W _____

Emergency Contact 1. Name _____ Cell _____ Cell _____
Phone _____

2. Name _____ Phone _____

Medical Insurance Company _____ Policy # _____

Please attach a copy of your insurance form to this card.

Company Address _____

Immunization Status and Date: Tetanus _____ Typhoid _____ Polio _____

List any physical limitations and /or special instructions that might be helpful to a physician (allergies, migraines, rare blood type, allergies to drugs, etc.):

MEDICAL AND SURGICAL WAIVER

I, _____, the parent and/or legal guardian of _____,
A minor, hereby acknowledge that said minor is presently under my care, custody, and control.

In the event there arises an emergency necessitating medical or surgical attention, I hereby consent and give my permission to the staff of Woodland Park Baptist Church or supervising adults for any attending physician to make such decisions and to perform such medical treatment and/or surgery upon said minor which may in their sole discretion be necessary and proper under the circumstances.

I, the undersigned parent/guardian do release, acquit, discharge, and covenant to hold harmless Woodland Park Baptist Church, its staff, personnel, or its representatives, during the below stated effective year. This agreement includes all activities and trips, planned, conducted or participated in by Woodland Park Baptist Church

BEHAVIORAL STANDARDS

I further understand and agree that, in the event that the above named minor be involved in any non-Christian or dangerous activities, I will pay his or her expenses to be sent home immediately at the discretion of the approved sponsors and/or church representatives.

Signature of Parent and/or Guardian _____ Date _____

Effective January 1, 2012-December 31, 2012

Certificate of Acknowledgement of
Notary Public

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