

Transportation and Emergency Release Form
Milwaukie Lutheran Church
Milwaukie, OR 97222-6097

I hereby grant permission for my child _____ to ride a chartered bus or in parent's cars to activities and events sponsored and supervised by Milwaukie Lutheran Church.

Signed _____ Date _____



I hereby release Milwaukie Lutheran Church, its staff and sponsors, from responsibility and liability for any injury or illness that my child may sustain during church-sponsored and supervised events. In case of emergency, I hereby authorize an adult leader of the event, as an agent for me, to consent to any X-ray examination, medical, dental or surgical diagnosis, treatment and hospital care advised and supervised by a physician, surgeon, or dentist (as appropriate) licensed to practice under the laws of the state that the service is being rendered. I expect to be contacted and notified as soon as possible.

Signature _____ Date _____
(parent or legal guardian)

Emergency phone number (s) _____

Medical information:

Family Doctor's Name _____ Phone _____

Date of Last Tetanus Shot _____

Allergies _____

Medication currently being taken _____

Physical limitations _____

Medical Insurance Provider _____

Policy Number _____ Policy Member Name _____