

**Lamont Alliance Church Youth and Kids Ministry 2023-2024
Authorization & Medical Consent Form**

Information received is confidential and is being gathered for the purposes of serving children and teenagers while in the care of Lamont Alliance Church. Any medical information collected here serves to authorize Lamont Alliance Church, and its staff and volunteers, to obtain medical assistance in care of emergencies. This document is valid one year from the signed date. In the case of custody agreements, please include the proper form authorizing parental contacts. Please fill out one form per child/teen.

Note that the safety of your child is of utmost importance to us, and we will take all necessary precautions to ensure it.

A. Student Information

Name of Student: _____ Student Cell #(if applicable): _____

Date of Birth: _____

B. Parent Information

Name of Parent(s)/Guardian(s): _____

Full Address: _____

Best Phone Number to call if there is a problem: _____

Email: _____

C. Medical Information

Does your child have any physical, emotional, mental, behavioural concerns, allergies or limitations that we should be aware of?

D. Online Security - For teenagers only.

We are aware of the concerns around online interactions and the dangers that exist because of it. Lamont Alliance has a strict guideline for leader interaction with youth through social media and texting. The primary and exclusive purpose of these interactions is to connect with and encourage your child, grow relationships, and advise of programming information. By initialling below and signing this waiver, Please contact the church office with any concerns or limitations.

E. Photos

Your signature below will grant permission for the reasonable use of pictures containing your child in any or all of the following ways: brochures, newsletters, promotional material, church commemorative features (e.g., slideshows, bulletins boards, etc.), church social media posts, and church website. Please indicate here by

checking the box if you request that pictures of your children **NOT** be used in the above-mentioned ways. I do not want my child's photos used for the above reasons.

F. Ministry Activities

I/we, the parent(s)/guardian(s) named above, authorize Lamont Alliance Church staff and volunteers to transport my child to off-site locations for the purposes of events and gatherings. Initials:

I/we, the parent(s)/guardian(s) named above, authorize Lamont Alliance Church Ministry Staff to sign a consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above. In such issues every effort will be made to contact the parent(s) as soon as possible. Initials:

I/we, named above, undertake and agree to indemnify and hold blameless the staff and volunteers of Lamont Alliance Church, its Pastor and Board of Elders and the Western Canadian District of the Christian and Missionary Alliance in Canada from and against any loss, damage or injury suffered by the participant as a result of being part of the activities of the Lamont Alliance Church, as well as any medical treatment authorized by the supervising individuals representing the church. Initials:

This consent and authorization is effective only when participating in or travelling to events of the Lamont Alliance Church.

I/we have read, understood and agree with the above and sign it to cover all student ministry activities through to one year signed date.

Parent 1 Name:

Parent 1 signature:

Parent 2 Name:

Parent 2 signature:

G. Purpose and Extent of information collection

Lamont Alliance Church is collecting and retaining this personal information for the purpose of enrolling your child in our programs, to assign the student to the appropriate groups, to develop and nurture ongoing relationships with you and your child, and to inform you of program updates and upcoming opportunities at our Church. This information will be maintained indefinitely as it is a requirement of our insurance company and legal counsel. If you wish Lamont Alliance Church to limit the information collected, or to view your child's information, please contact us.