

Permission and Medical Release Form  
Our Redeemer Lutheran Church  
825 Golf Ave SW. Pine City, MN 55063

**Participant Information**

Name: \_\_\_\_\_ DOB \_\_\_\_\_

Parents/Guardians Names: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Place of Work and Phone Number: \_\_\_\_\_

**Alternate Emergency Contact**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Medical Information** - Please attach a copy of the insurance card with this form Insurance

Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Insurance Company Phone Number: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

Known Medical Conditions: \_\_\_\_\_

Current Medicaiton: \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_\_

Any Other Limitations: \_\_\_\_\_

In case of emergency, I understand that every effort will be made to contact me. If I cannot be reached, I hereby give Our Redeemer Lutheran Church of Pine City, Minnesota permission to act on my behalf in seeking medical treatment for me/my child or ward in the event that such treatment is deemed necessary by Our Redeemer Lutheran Church staff.

I further \_\_\_ authorize/ \_\_\_ do not authorize the youth director and/or other adult leaders to give my youth (please circle any that apply): Tylenol, Ibuprofen, Pepto-Bismol, Imodium, Tums, or Benadryl as the need arises during youth activities, events and trips.

And I hereby release and hold harmless Our Redeemer Lutheran Church, its staff, and volunteer adult chaperones, as well as staff and volunteers of all assisting groups and vendors, from any and all liability arising from my child's participation in these events. Effective October 1, 2021 - September 31, 2022.

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**Parent/ Guardian Signature**

**Date**

This permission and medical release form will be kept on file for the calendar year of 2021-2022 as the dates listed above. Complete the form once and turn it in for the year. It is your responsibility to update any information as needed throughout the year. If you have any questions please feel free to contact Leigha Lange by phone at 629-2985 or by email at youthorlc@gmail.com