

APPENDIX IV

**Union Campground, Inc.
182 Union Rd., Waco, Ga. 30132**

MINOR'S FULL NAME:

(Last) (First) (MI)

Birth date: ____/____/____ Minor's Social Security # ____/____/____

MINOR'S MEDICAL HISTORY:

Allergies: _____

Current Medications: _____

Date of Last Tetanus Shot: _____ Other Medical Concerns: _____

MEDICAL INSURANCE INFORMATION:

Insurance Company: _____ Phone: _____

Policy/Group# : _____

Regular Physicians

Name: _____

Primary Insured (parent/guardian): _____

PARENT/LEGAL GUARDIAN/EMERGENCY CONTACT INFORMATION:

Name: _____

Relationship to Minor: _____ E-Mail Address: _____

Mailing Address: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Place of Employment: _____

Emergency Contact Person (other than parent/legal guardian)

Name: _____ Phone: _____ Cell Phone: _____

PERMISSION/HOLD HARMLESS FORM:

As the custodial parent or legal guardian of the minor named above. I am aware of the involvement and participation of this minor in activities at and excursions with Union Campground, Inc groups, staff, and adult chaperones. I request and authorize the staff and adult chaperones of Union Campground, Inc. to exercise temporary custody and care of this, my minor child while on church-related events. During such time as my child is in the care of the staff and/or adult chaperones and in the event that my child shall need medical treatment or care, including, but not limited to emergency surgery, hospitalization, or other emergency or non-emergency medical care, I hereby authorize and consent to such medical treatment and care that may be deemed necessary for my child, at my expense. I shall be responsible for any and all costs or expenses of providing such care and treatment for my child, and shall reimburse, indemnify, and hold harmless Union Campground, Inc., its staff and adult chaperones from same. I further understand that it is solely my responsibility to provide the organization with an updated MEDICAL RELEASE AND PERMISSION FORM if any changes occur in the information provided above. I understand that this form will remain on file at the campground to be used for all events in which my child participates.

Signature of Parent/Legal Guardian: _____

Print Name: _____