

**PRESTONWOOD BAPTIST CHURCH  
STUDENT MINISTRY &  
STUDENT MUSIC MINISTRY**

**Adult Sponsor Release and Hold Harmless Agreement/Image Waiver  
for September 1, 2009 – August 31, 2010**

My name is \_\_\_\_\_ and by this instrument, I do hereby release, acquit, hold harmless and forever discharge PRESTONWOOD BAPTIST CHURCH, its agents, servants, and employees, and all persons, natural or corporate, in privity with them or any of them, from any and all claims or causes of action of any kind whatsoever, including but not limited to actions, suits and/or claims for any bodily injuries, death or property damage which may be sustained by myself while participating in any activity, or activities, including travel to and from such activities and any negligence or lack of care due or claimed to be due to the conduct of any agent, servant, or employee of PRESTONWOOD BAPTIST CHURCH. By signing this agreement, I give my permission to receive medical attention in the event of an emergency. It is my responsibility to provide current and correct insurance information to the Student Music and Student Ministry offices and my responsibility to update such information should it change within the year.

**Date:** \_\_\_\_\_  
\_\_\_\_\_ **Signature**

**Medical Insurance Policy #:** \_\_\_\_\_  
**Policy issued under name of:** \_\_\_\_\_

*IF MY INSURANCE **CHANGES** AT ANY TIME DURING THE YEAR, I UNDERSTAND IT IS **MY RESPONSIBILITY** TO NOTIFY THE STUDENT MINISTRY & STUDENT MUSIC MINISTRY OFFICES.*

**CONSENT AND WAIVER REGARDING THE USE OF PHOTOGRAPHS AND VIDEO**

I hereby allow photographs and video of my participation in the Prestonwood Student Ministry & Prestonwood Student Worship Ministry events to be published via print, video, or website which are affiliated with Prestonwood Baptist Church. I understand that publication may be accomplished electronically via the Internet/World Wide Web, copying my photographs and video there from, and subsequently using, altering, or republishing it without my consent. I waive any claim for damages against the Church from the un-consented-to use, alteration, or republication of my photographs and video by third parties accessing the Internet/World Wide Web or obtaining copies of the print or video material.

**SIGNATURE:** \_\_\_\_\_

Printed Name \_\_\_\_\_

Date: \_\_\_\_\_

# PRESTONWOOD BAPTIST CHURCH STUDENT MINISTRY & STUDENT MUSIC MINISTRY

## SPONSOR MEDICAL INFORMATION AND HISTORY FORM

**After competing form, please sign and date at the bottom.**

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
*Street City State ZIP*

HOME PHONE: \_\_\_\_\_ Please Circle: Male Female

EMERGENCY CONTACT: \_\_\_\_\_ PHONE# \_\_\_\_\_ or \_\_\_\_\_

MEDICAL INSURANCE? \_\_\_\_\_ POLICY #: \_\_\_\_\_

INSURANCE COMPANY NAME: \_\_\_\_\_

List date of last immunization: DPT: \_\_\_\_\_ Tetanus: \_\_\_\_\_

MMR: \_\_\_\_\_ Polio: \_\_\_\_\_

Check if you have had:  Chicken Pox  Whooping Cough  
 Measles  Other  
 Mumps

Please list any allergies: Foods \_\_\_\_\_ Insects \_\_\_\_\_  
Medicines \_\_\_\_\_

Previous Serious Illnesses: \_\_\_\_\_

Current medications and dosages: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Dietary Issues: \_\_\_\_\_

Other: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_