

HMC PARENTAL CONSENT & EMERGENCY MEDICAL RELEASE FORM

2015-2016 Permission Slip for Transportation & Off-Campus Activities

PLEASE NOTE: Parent and student must sign this form. Kindly return completed form to HMC's Faith Formation Office at your earliest possible convenience. Thanks for your understanding and cooperation!

Anticipated Event:

☐ I grant permission for all events this year.

☐ I grant permission for this event only.

Student Name:		Grade:		Student's Catechist:	
Street Address:			City, State, Zip:		
Home Phone:		Parent Cell Phone:		Parent Work Phone:	
Student* Cell Phone:					
Family Email:					
Custodial Parent / Guardian Name:					
Student's Doctor:			Doctor's Phone #:		
Family Health Insurance Carrier:			Insurance Policy #:		
OTC treatment(s) that can be administered, by a chaperone, if student requests pain relief (<i>according to label directions</i>): <input type="checkbox"/> NONE. <input type="checkbox"/> Cough Drop. <input type="checkbox"/> Ibuprofen (generic, Advil, etc.) <input type="checkbox"/> Acetaminophen (generic, Tylenol, etc.) <input type="checkbox"/> Please phone first, any time of day or night					
Medication(s) to be taken during outing (<i>Must be given to chaperone, in a ziplock bag, to administer and store. Please list with instructions – use back side of form, if necessary</i>):					
Other Health Information (<i>allergies, medical conditions, dietary restrictions, etc.</i>):					
Emergency Contact Person #1:		Telephone Number(s) for Emergency Contact:		Relationship to Student:	
Emergency Contact Person #2:		Telephone Number(s) for Emergency Contact:		Relationship to Student:	

■ **PARENT/GUARDIAN:** As custodial parent and/or legal guardian, I hereby consent to the participation of my son/daughter in the Holy Mother of Consolation (HMC) event noted above. I understand this form provides permission for my student to participate in special program-related events held at a location *other than* the church grounds of HMC Church—whether it's a short walk nearby or a bus trip to another town. I understand that private or public transportation may be provided. I understand that HMC, in compliance with Diocese of Madison "Safe Environment" requirements, has taken proper precautionary steps to help assure my child's safety: background checks for adult volunteers of the parish, driving-record checks of volunteers who provide transportation, and a ratio of 1 adult per 8-10 students for adequate supervision. **FURTHER**, as parent/legal guardian, I remain fully responsible for any actions taken by the above-named student—including disruptive or dangerous behavior that may necessitate a phone call requesting I retrieve my child immediately. Having such reassurances, I hereby hold harmless HMC Church, the Diocese of Madison, its officers, directors and agents, and all employees, chaperones, and additional churches/organizations associated with this event. **FINALLY**, in the event of an emergency, I hereby give permission to transport my child to a hospital for emergency treatment or surgery.

Parent / Legal Guardian's Name (*Please Print*)

Parent / Legal Guardian's Signature

Date

■ **STUDENT:** As an HMC student or invited guest, I agree to (a) Follow all the rules of the event, (b) Adhere to all staff and volunteer requests, and (c) Refrain from behaviors I know to be disruptive/dangerous/disrespectful /illegal. If I choose to ignore any of these, even after I've been warned, I understand that my parent/guardian or emergency contact will be phoned immediately to retrieve me from the event.

Student's Name (*Please Print*)

Student's Signature

Date

** While we don't encourage cell phone use at many parish-sponsored events, some – such as trips to a water park or baseball stadium – include scenarios where a student MAY become separated from the group or lost in a crowd. A youth's cell phone, IF s/he has one, can be a useful tool for all involved.*