

Trinity United Methodist Church
607 Airport Road
Huntsville, AL 35802
(256) 883-3200



2006-2007 Medical Form

(Effective Sept. 1, 2006- August 31, 2007)

Name of Youth _____ Birthdate _____

Address _____ Grade _____

City _____ State _____ Zip Code _____

Parent's Phone _____ cell _____

Business _____ pager _____

Notify in Case of Emergency _____

Phone Number _____ Relationship _____

Health/Accident Insurance Company _____

City _____ State _____ Zip Code _____

Policy Number _____ Group Number _____

List any allergies (food, drugs, pollen, etc.)

Tetanus Toxin (date last given) _____

Have you had any serious illness or surgeries in the past year? Yes No
(If yes, please list on separate sheet and attach.)

List any condition that a physician treating you should be aware of and
medication you are taking: _____

Family Doctor _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

I give permission for this youth to travel with adults assigned as Trinity United Methodist Youth leaders. While in their care, I give my permission for them to seek professional care in case of medical or dental emergency.

Signature _____ Date _____

_____ My Commission Expires _____

Notary Public

2006-2007 Medical Form

We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any medical or dental examinations, diagnostic tests or procedures, treatments or surgery, and hospital care, deemed necessary to the minor by any physician or dentist licensed under the provisions of the Medical Practice Act regardless of the medical or dental facility in which the care is rendered.

The undersigned shall be liable and agrees to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned minor pursuant to this authorization.

Should it be necessary for our (my) minor to return home due to medical or any other reason, we (I) shall assume all transportation costs to return them to us.

Father Date

Mother Date

Legal Guardian Date