

**MEDICAL/LIABILITY
RELEASE**



A Performing Youth Group
Sharing the Light of the Gospel
Through Music

We are the parents or legal guardians for the following minor child:

Name _____ (please print) Birth Date _____

Telephone where parents may be reached: (Home) _____ (Work) _____

Cell Phone) _____

Any Special Medication or pertinent information _____

Parents' Address _____

Family Physician _____ Phone _____

Address _____

Family Dentist _____ Phone _____

Address _____

Medical Insurance Co. _____ Policy Number _____

Ward _____ Bishop _____ Phone _____

We hereby grant permission for our above named minor child to participate in Zion Choir and the travel that is involved with Zion Choir.

We understand that this activity will involve travel in and around the San Francisco Bay Area and that any travel involves some risk.

Understanding all of the above, we hereby release Zion Choir, its members and leaders from liability for any injuries that our above-named child may incur while traveling to, during, or returning from these activities.

We also hereby grant permission for the adult chaperones of these events to obtain any needed emergency medical or dental care for our child while he/she is participating in Zion Choir.

Dated: _____

_____ Signature of Father or Legal Guardian

_____ Signature of Mother or Legal Guardian