

Eastwood Baptist Church Enrollment Form

This form is valid from May 27, 2020 – August 15, 2021.

Last Name

Student First and Last Name _____ Age _____ DOB _____ Grade _____ Male _____ Female _____

School Attending _____ Student Mobile Phone _____

Street Address _____ City _____ State _____ Zip _____

Mother's First & Last Name _____ Cell Phone _____ Email _____

Street Address _____ City _____ State _____ Zip _____

Father's First & Last Name _____ Cell Phone _____ Email _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Emergency Contact Name _____ Contact # Work/Home/Cell (Circle One) _____

Who is allowed to pick up your child? _____
Name, Relationship

Medical Insurance Policy # _____

Name Policy Issued Under _____

Insurance Company Name _____ Hospital Insurance? Yes No

Please list any allergies including food: _____

My name is **(PARENT NAME)** _____ and by this instrument, I do herby release, acquit, hold harmless and forever discharge EASTWOOD 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 **(STUDENT'S NAME)** _____ 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 EASTWOOD BAPTIST CHURCH. By signing this agreement, I give my permission for **(STUDENT'S NAME)** _____ to receive medical attention in the event of any emergency. *It is my responsibility to provide current and correct insurance information to the Student Ministry office and my responsibility to update such information should it change within the year.*

I herby allow photographs and video of my student's participation in the EASTWOOD BAPTIST CHURCH STUDENT MINISTRY to be published via print, video, or website which are affiliated with EASTWOOD BAPTIST CHURCH. I understand that publication may be accomplished electronically via the Internet/World Wide Web, copying my student's photographs and video there from, and subsequently using, altering, or republishing it without my consent. I waive any claim for damages against EASTWOOD BAPTIST CHURCH from the un-consented-to use, alteration, or republication of my student's photographs and video by third parties accessing the Internet/World Wide Web or obtaining copies of the print or video material.

Signature of Parent or Legal Guardian _____ Printed Name of Parent or Legal Guardian _____

Printed Legal Name of student _____ Date _____

First Name