



St Andrew's Sunday School Registration 2020 to 2021

St Andrew's Ev. Lutheran Church
1100 E Murdock Ave, Oshkosh, WI 54901
(920) 235-6616
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This year our Sunday School program will begin in October in a virtual format. Teachers will provide video-recorded lessons for families to do at home, on their own time. On occasion, we will also be providing take-home kits for crafting lessons for families to do at home. Please make sure your children are registered so they can participate in these wonderful family activities.

YOUTH LIABILITY RELEASE & MEDICAL INFORMATION FORM (Sept 1, 2020 to August 31, 2021)
Print or type all information CLEARLY in BLACK ink. This form is required for attendance at all activities and is valid only for the dates listed above. Participants 18 and over may sign for themselves. If the participant is under 18, at least one legal guardian must sign. Please have your medical insurance card with you at all times.

Participant # 1: Full name (first, middle, last) _____

If you have additional participants, please complete one form per participant. If the medical and/or emergency information is the same for all members of the family, you can staple the registrations together and only complete those sections on one form. Please see the office if you have any questions.

Email: _____
(Where do you want the lessons for this child sent to?)

Birthday: (mm/dd/yyyy) _____/_____/_____

Gender: ___female ___male ___prefer not to say ___other

Parent/Guardian information

Name: _____

Address: _____

Preferred phone: (_____) _____

Additional phone: (_____) _____

What is your preferred method for us to contact you:

___Phone ___Email ___Text (Other? Please explain)

I/We are willing to help with:
___projects ___refreshments ___anything (please contact me)

Participant's Medical History: (allergies, medical conditions, current medications, dietary issues?)

Insurance Carrier: _____

Insurance ID/Group number: _____

By submitting this form, I (We) acknowledge that any **photos/videos** produced remain the property of St Andrew's Lutheran Church and permit St Andrew's Lutheran Church to use such photos/videos for church related purposes and publicity. I (We) understand that the first name of the participant may be posted with the photos/videos. I (We), the undersigned, do hereby release, forever discharge, and agree to hold St Andrew's Lutheran Church, its staff and volunteers, harmless from any and all liability, claims, demands, lawsuits, and expenses arising from personal injury, sickness, death, or property damage of any nature whatsoever, which may be incurred or suffered by the undersigned and/or participant while attending, participating in, or traveling to/from any church sponsored event or activity. Furthermore, I (We) hereby assume all risk of personal injury, sickness, death, damage and expenses arising from the undersigned and/or participant's participation in all activities, including recreation and work activities involved in any church sponsored event or activity. In addition, I (We) authorize and grant permission to furnish all necessary transportation, food, lodging, and medical treatment for the undersigned and/or participant. I (we) give permission for diagnoses, treatment, and prescription of medication in accordance with standard medical practice by appropriate health care personnel. I (We) release St Andrew's Lutheran Church, its staff and volunteers of all responsibility and consequences that may arise as a result of any injury suffered and resulting treatment. Further, I (We) agree to accept any and all financial responsibility as a result of medical treatment. Furthermore, I (We) understand that St Andrew's Lutheran Church, its staff and volunteers will not be liable if the undersigned and/or participant fails to cooperate with the rules and that any infraction of the rules may result in immediate dismissal from the event or activity at my (our) expense. If the participant is under 18 years of age: I (We), the parents or legal guardians, hereby grant permission for the above-named participant, to fully participate in the above activity and all its undertakings. My child agrees to abide by all the rules and regulations stated by St Andrew's Lutheran Church, its staff and volunteers. I (We) acknowledge that a copy of this form is as valid as the original.

_____ Agree

PARENT INITIAL TO AGREE WITH ABOVE STATEMENTS AND LIABILITY RELEASE: _____

Date: ____/____/____

Emergency Contact Information:

Please provide the name of a contact we can call in case of emergency. This contact name and number needs to be different than the parent info entered above.

Name: _____

Relationship to student: _____

Phone: (____) _____

Additional phone: (____) _____

Thank you for registering! We would be happy to talk with you about your youth's activity and participation here at St Andrew's Lutheran Church. Please feel free to call (920) 235-6616.