

# Saint Bede Permission/Release Form

For PreK-12



## Use of Pictures and Videos – Year 2018/2019

I give permission for pictures and/or videos of my child, \_\_\_\_\_, engaged in Saint Bede events or activities to be posted in the Saint Bede publications or websites. Names of participants will not be used without express permission from the parent or guardian.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Sports and Activity Waiver-Year 2018/2019

I release Saint Bede from any liability associated with my child, \_\_\_\_\_'s participation in sports/activities sponsored by Saint Bede.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Saint Bede Catholic Church Annual Medical Release Form School Year 2018-2019

Participant's Full Name: \_\_\_\_\_ Grade: \_\_\_\_\_

NAME OF PARENT/GUARDIAN: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy Holder's Name: \_\_\_\_\_

Relationship to Policy Holder: \_\_\_\_\_ Policy Number/ID Number: \_\_\_\_\_

In case of an emergency notify: \_\_\_\_\_

Telephone Numbers: \_\_\_\_\_

### Medical Information:

Is there any other physical or emotional condition of which we need to be aware? \_\_\_Yes \_\_\_ No Please explain. \_\_\_\_\_

Does your child have any allergies? \_\_\_Yes \_\_\_ No

If "YES", please list. \_\_\_\_\_

Does your child have medication of any type with them? \_\_\_Yes \_\_\_ No

If "YES", please list. \_\_\_\_\_

In the event of any emergency, I give authority to the accompanying adults to authorize treatment. I understand that any attempt to notify me will be made before any treatment is authorized.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_ I Accept

By selecting the "I Accept" button, you are signing this Permission/Release Form electronically. You agree your electronic signature is the legal equivalent of your manual signature on this Permission/Release Form.

PreK - 8th grade, email completed form to: [rripple@bedeva.org](mailto:rripple@bedeva.org)

9th - 12th grade, email completed form to: [ppalm@bedeva.org](mailto:ppalm@bedeva.org)