

**RELEASE FORM**

This form is to be completed by GUESTS of Northland Christian School students who will be attending an NCS sponsored event. If you are under the age of 18, your parent or guardian must sign this form.

**Participant Name:**\_\_\_\_\_ **Birthday:**\_\_\_\_\_

Person to notify in case of emergency:

**Name:**\_\_\_\_\_

**Relationship:**\_\_\_\_\_

**Phone Number:**\_\_\_\_\_

**List of allergies to medications:**\_\_\_\_\_

In the event that I cannot be reached at a time of illness or accident, or the emergency is such that time does not permit such contact, I authorize Northland Christian School to take my child to the nearest hospital emergency facility for treatment.

**Insurance Company:**\_\_\_\_\_

**Group or Policy Number:**\_\_\_\_\_

**Phone Number:**\_\_\_\_\_

In signing this form, as a parent or guardian, I hereby agree to release the school, its officers and its directors of any liability for injury or accident occurring on the school premises or while attending an NCS sponsored event. I hereby give permission for my child to attend an NCS sponsored event accompanied by school personnel.

\_\_\_\_\_  
**PARENT/GUARDIAN SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PARTICIPANT SIGNATURE**