

MEDICAL INFORMATION & EMERGENCY AUTHORIZATION FORM

King of Kings Lutheran Church ~ 1583 Radio Drive ~ Woodbury, MN 55125 ~ 612-738-3110

King of Kings Children's and Youth & Family Ministries seeks to provide safe, fun and faith-filled experiences for all participants. Therefore, we set certain guidelines that need to be followed for our programs. These guidelines are outlined below.

The following incidences will result in a participant being sent home *without warning*. A parent/guardian will be contacted and arrangements made to send the student home at the expense of the parent(s) or guardian(s):

- Possession or use of any non-prescription drugs or alcohol.
- Possession or use of any harmful weapon.
- Any attempt to physically or emotionally harm another person.

Any other incidence requiring discipline will be handled at the discretion of the trip leader(s).

STUDENT NAME _____

BIRTH DATE _____ AGE _____ GRADE COMPLETED 2008 _____

PARENT(S)/GUARDIAN(S) _____

ADDRESS _____

CITY/STATE/ZIP _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE/PAGER _____

EMAIL _____

EMERGENCY CONTACT _____

EMERGENCY PHONE _____

MEDICAL INSURANCE CO. _____ POLICY NUMBER _____

DENTAL INSURANCE CO. _____ POLICY NUMBER _____

FAMILY DOCTOR _____ DOCTOR'S PHONE _____

HOSPITAL _____ DENTIST _____ DENTIST'S PHONE _____

DATE OF LAST TETANUS SHOT _____

PLEASE LIST ANY PRESCRIBED MEDICATIONS, ALLERGIES, DIET CONCERNS OR ANY OTHER HEALTH CONCERNS HERE:

I give permission to any adult leader supervising my youth to secure any medical care they deem necessary while I, or my child, participate in any program sponsored by King of Kings Lutheran Church. In a situation where medical care is required these steps may include, but are not limited to the following:

- Attempt to contact a parent or guardian.
- Administer basic first aid for minor incidences.
- Seek professional medical examination and/or treatment.

Any expense incurred for medical treatment will be the responsibility of the participant's medical/dental coverage or family.

I have read the information on this form and filled in the requested information to the best of my knowledge. I understand that it is my responsibility to inform King of Kings if this information changes in the future. I hereby release King of Kings from any liability as a result of my or my child's participation in programs sponsored by King of Kings Lutheran Church.

Parent/Guardian Signature _____ Date _____

SUMMER 2008 CAMP VOLUNTEER FORM

VBS, Camp Do-Re-Mi, Day Camp, Bugs Camp and American Girls Camp

NAME _____ ADULT TEEN

ADDRESS _____ CITY/STATE/ZIP _____

EMAIL _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE/PAGER _____

June 16-20

Vacation Bible School

(Age 4 by 9-1-08 through completed 3rd grade)

PLEASE CIRCLE THE SESSION YOU ARE VOLUNTEERING FOR:

Session 1: June 16-20 9:00-11:30 a.m. Session 2: June 16-20 1:00-3:30 p.m.

Please indicate the area(s) of volunteer work you are willing to do. Additional details and instructions will be given to volunteers prior to the start of camp.

- VBS Teacher.** This is a 5 day commitment. Teach the same bible lesson every day to 2 different groups of children. Lesson plans, training, and supplies are provided.
- Crew Leader.** This is a 5 day commitment. You travel with your same group of children to each of the different sites. You will receive a t-shirt matching your crew. I do / do not want my child in my crew. My child's name is _____
Volunteer T-shirt size: Child Large Adult Small Adult Medium Adult Large Adult XL
- Recreation Crew** (direct games/activities)
- Craft Crew** (assist kids)
- Snack Crew** (prepare and serve snack)
- Child Care Crew** (care for young children of VBS volunteers)
- Decorating and Set-Up Crew** (plan and set up decorations. Set up on June 15, 1-4:00 pm)
- I will donate snack items for kids**
- I will donate 2 dozen treats for our awesome volunteers**

I will need Child Care on _____ for the following children:

Name(s) _____ **Age(s)** _____

July 21-24

Camp Do-Re-Mi

(Completed Kindergarten through 3rd grade)

- Crew Leaders—teens or adults** (lead a group of children to each activity)
- Music Crew—upper elementary, teens, or adults** (help with songs and music activities)
- Recreation Crew** (leads games)
- Craft Crew** (prepare and assist)
- Kitchen Crew** (prepare and serve)
- Decorating & Set-up Crew** (help make decorations and set up)
- Snack Crew** (furnish pre-determined snacks)
- Nursery Workers—upper elementary, teens or adults** (work in the nursery during camp hours caring for children of other volunteers) Monday Tuesday Wednesday Thursday
- Planning Team** (meet in the months prior to camp to plan and organize)

4 day volunteers receive a free t-shirt. Otherwise, you may purchase a t-shirt for \$7.00 (attach payment to this form).

Volunteer T-shirt size: Child Large Adult Small Adult Medium Adult Large Adult XL

SUMMER 2008 CAMP VOLUNTEER FORM, cont.

July 13-17

Day Camp

(Completed 1st grade through 4th grade)

- Host two counselors in our home for four nights
- Host counselors for an evening meal
- Provide snack donations (predetermined)
- I will donate food items for Thursday's hot dog lunch
- I will help set up and serve Thursday's hot dog lunch

July 28-Aug 1

B.U.G.s Camp with Overnight

(Completed 4th and 5th grade)

- I will chaperone for FMSC Monday Tuesday Wednesday Thursday
- I will chaperone an off-site event
- Van driver
- I will donate food items for meals
- I will help prepare and serve Thursday evening meal (Arrive by 6 pm)
- I will help prepare and serve Friday morning breakfast (Arrive by 6 am)
- I am interested in helping with the overnight (Arrive by 8 pm; 1 male and 1 female)

July 7-11

American Girls Camp

(Girls ages 7 and older)

- I will help during camp Monday-Friday
- I will help prepare and set up for camp
- Camp planning committee
- Camp set up July 6, 1-4 pm
- Crew leader
- Kitchen Lead (plan daily snack and related lesson)
- Games Lead (plan daily games and related lesson)