

Silverdale



Student Ministry

7236 Bonny Oaks Drive
Chattanooga, TN 37421-1099
(423) 892-2173

Name _____ Age _____

Street Address _____

City _____ State _____ ZIP _____

In case of emergency notify _____

DAY PHONE # (____) _____ PM PHONE # (____) _____

Family Physician _____ PHONE # (____) _____

Do you have insurance? _____ YES _____ NO

Family Insurance Company _____

Policy # _____

Group # _____

Do you have any health information that we should be aware of? _____ YES _____ NO

If so, what? _____

MEDICAL RELEASE:

I, _____ (parent/guardian), give the adult sponsors of Silverdale Baptist Church the authority to provide or sign for medical treatment for _____ (student's name).

(Date)

(Parent/Guardian)