

## Medical and Agreement Form

For All Events/Activities "Sponsored" by:

Eastmont Church  
62425 Eagle Road  
Bend, Oregon 97701  
Phone: 541-382-5822 Fax: 541-382-5831

Participant \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City/ State \_\_\_\_\_ Zip \_\_\_\_\_

School/Work \_\_\_\_\_ Birth Date \_\_\_\_\_

Parent/Guardian(if under age 18) \_\_\_\_\_ Relationship \_\_\_\_\_

Parent/Guardian Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Medical Insurance \_\_\_\_\_ Policy Number \_\_\_\_\_

Is the participant allergic to any type of medicine? \_\_\_\_\_ If yes, please list: \_\_\_\_\_

Other Medical Information and Special Needs \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Agreement

I/we, as parents/guardians of participant under age 18, believe that the participant is physically and mentally able to participate in the sponsored activities. We understand that this activity, as in any activity, does present the risk of injury, or even death, to the participant, and we have advised the participant of those possibilities. We represent to you that we and the participant assume the risk of any such injury or death, to the participant and will hold Eastmont Church, its agents, employees and representatives harmless from any liability to participant and to any other person or entity arising as a result of the conduct of the participant in this activity and we agree to defend and indemnify Eastmont Church, its agents, employees and representatives against any claim or liability arising as a result of such conduct.

I hereby for myself, my heirs, any executors or administrators waive, release and discharge Eastmont Church and its attendees, any person connected with this event or its representatives from any and all rights, claims, or liabilities for damages caused by me or to anyone else, arising out of or in connection with my participation in this event. Furthermore, I, my heirs, executor, or administrator indemnify and hold all persons above free and harmless from and against any and all actions, causes of actions, claims, and demands for damage, losses, injuries, or expenses sustained or claimed to have been sustained by any person as a result of the use of any property of Eastmont Church for any activity in which I or participant under age 18 is participating, spectating, sponsoring, officiating or any other activity while on the Eastmont Church premises.

I, as the participant, also understand that while in attendance at Eastmont Church events/activities, I am under the direction and authority of those leaders in charge. I also understand that the use of alcohol, tobacco products, illegal drugs, fireworks, abusive and lewd behaviors are prohibited. I have read this entire form and agree to its contents.

Parent/Guardian Signature(if Participant under age 18) \_\_\_\_\_ Date \_\_\_\_\_

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_