

**DIOCESE OF ALLENTOWN
PARENTAL/LEGAL GUARDIAN PERMISSION FORM & RELEASE**

MEDICAL MATTERS

I (we) hereby warrant that to the best of my (our) knowledge, my (our) child is in good health, and I (we) assume all responsibility for the health of my (our) child.

Emergency Medical Treatment: In the event of an emergency, I (we) hereby give permission to transport my (our) child to a hospital for emergency medical or surgical treatment. I (we) wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me (us) at the above numbers, contact:

Name & relationship _____ Phone _____

Family physician _____ Phone _____

Medical Insurance Information

Health Plan Carrier _____

Group # _____ I.D. # _____

Subscriber's Name _____

Medications: My (our) child is taking medication at present. My (our) child will bring all such necessary medications, and such medications will be well-labeled. Names of medications and concise directions for seeing that the child takes such medications, including dosage and frequency of dosage, are as follows:

I (we) hereby grant permission for non-prescription medication (such as non-aspirin products such as acetaminophen or ibuprofen or throat lozenges) to be given to my (our) child, if deemed appropriate.

Specific Medical Information: The Vocations Office should be aware of the following medical conditions. (The Vocations Office will take reasonable care to see that the following information will be held in confidence.)

Allergic reactions (medications, foods, plants, insects, etc.) _____

Immunizations (Date of last tetanus/diphtheria immunization) _____

Does child have a medically prescribed diet? _____

Any physical limitations? _____

Has child recently been exposed to contagious disease or conditions, such as mumps, measles, chicken pox, etc.? If so, date and disease or condition: _____

Other known physical, emotional, social or medical conditions or other specific information which may affect participation in Quo Vadis Days: _____

