

DNOW 2019 REGISTRATION FORM & PARENTAL CONSENT:

Student's First Name: _____ Student's Last Name: _____

Student's Cell Number: _____ Grade: __ Gender: __ DOB: _____ T-Shirt Size: _____

Address: _____ City: _____ State: _____ Zip: _____

Mother's Name: _____ Father's Name: _____

Mother's Cell Number: _____ Father's Cell Number: _____

Mother's Email: _____ Father's Email: _____

Student's Physician's Name: _____ Phone: _____

Medical Insurance Provider: _____ Policy Number: _____

Please list all known allergies (i.e., pet, food, medication, etc.):

Please list all medications taken daily:

Please list any over-the-counter medications (i.e., Tylenol, Advil, etc.) that may be dispensed to your student if needed:

**Cost is \$25 (Scholarships Available). Registration required by 1/9/2019 to guarantee shirt.
Can't get the form in by then? Text your shirt size to Ben! 214-675-2731**

PARENTAL CONSENT: **FORM MUST BE SIGNED IN THE PRESENCE OF A CHURCH STAFF MEMBER**

I, _____, the parent/guardian of _____, do hereby consent to his/her participation in the Disciple Now weekend retreat hosted by First Baptist Church in Cuero, Texas, on January 18-20, 2019. Furthermore, I consent for the aforementioned student to be transported by representatives of First Baptist Church, Cuero, Texas, as required for participation during the weekend. Additionally, I grant permission for representatives of First Baptist Church, Cuero, Texas, to obtain necessary medical attention for the aforementioned student in the event of illness or injury.

I, the undersigned, do hereby verify that the above information is correct, and I do hereby release and forever discharge First Baptist Church, Cuero, Texas, and its representatives or sponsors from any and all claims, demands, actions or cause of action past, present or future out of any damage or injury while traveling and participating in this event. **Form must be signed in the presence of a church staff member.**

Parent/Legal Guardian: _____ signature _____ print _____ Date: _____

Attested by (church staff): _____ signature _____ print _____ Date: _____