

Church of the Holy Spirit–Sunday Pre-School Program

2014/2015 Registration/Medical Information/Consent: Release of Liability

Annual Registration Fee: \$15.00 each family

Mail to: Holy Spirit Church, 3159 – Land Park Dr. Sacramento 95818

Student's Name _____

Street _____

Address _____

City, State, _____

Zip _____

Email _____

Address _____

Emergency Contact (Name/Phone
Number) _____

Student's Date of
Birth _____

MEDICAL INFORMATION

Family Physician & Phone# _____

Health Plan Name/Policy

CURRENT MEDICATIONS (Name, dosage,
times) _____

LIST ALL ALLERGIES TO FOOD OR DRUGS

Last Tetanus Shot _____

(Month/Year) _____

CONSENT TO TREAT

I (We) the undersigned parent(s) or legal guardian(s)
of _____,

a minor, do hereby authorize treatment of my (our) child by a licensed medical physician in the case of any accident or illness may so arise, or any hospitalization necessary, and/or to provide first aid. I (We) further agree to pay any and all reasonable costs associated with treatment not covered by my (our) insurance.

***Signature of Mother/Legal**

Guardian _____

Mother's home phone _____ Cell

phone _____

***Signature of Father/Legal**

Guardian _____

Father's home phone _____ Cell

phone _____

RELEASE OF LIABILITY

As parent(s) or guardian(s) of the minor named above, I release, hold harmless and discharge the Church of the Holy Spirit and the Diocese of Sacramento, its staff, officers, directors, employees, agents, sponsors, promoters, and affiliates from any and all liability, claim, loss damage, cost or expense and waive any such claims against any person or

organization arising directly or indirectly from or attributable in any legal way to any action or omission of any such person or organization with regard to the Catholic Faith Formation Program and its related activities.

Signature of Mother/Legal

Guardian _____

Date _____

Signature of Father/Legal

Guardian _____

Date _____

We, the parents will be attending Mass while our child / children is in Holy Spirit Preschool _____