



INFORMATION & MEDICAL RELEASE FORM

Must be completed and returned *with down payment.*

Form must be updated yearly.

GENERAL INFORMATION:

FULL NAME (As appears on ID or Passport) _____
 ADDRESS _____ CITY _____ STATE _____ ZIP _____
 EMAIL _____
 PHONE WHERE YOU CAN BE REACHED/TEXT _____
 BIRTHDAY _____ Male _____ Female _____

I understand that Get Real/Grace Point is a tobacco(in all forms), alcohol and drug free ministry/facility. Therefore, I agree to abstain from tobacco(in any form), alcohol or illegal drugs during my ministry time with Get Real.

Signed _____

T-Shirt Size _____

Do you play musical instruments? _____ What? _____

MEDIA RELEASE:

GRM has the right to use my/ my child's photo or video footage for presentations, newsletters, publications and/or the website.
 CIRCLE ONE: YES OR NO SIGNATURE _____ DATE _____

INSURANCE INFORMATION:

Health Insurance Company _____ Policy Number _____
 Parent/ Guardian _____ Phone _____
 Emergency Contact _____ Phone _____

MEDICAL INFORMATION:

Any health problems or major illnesses in the past year _____
 Condition(s) requiring medications-Please list meds _____

 Any physical disabilities or limitations _____
 Any known allergies/reactions _____

RELEASE TO TRAVEL:

18 & Under Requires Parental/Guardian Signature
 My Child has my permission to travel with Get Real Ministries, Inc. to:
 Mission Location _____
 Date: From ___/___/___ to ___/___/___
 Parent or Guardian Signature _____ Date ___/___/___

MEDICAL RELEASE:

In the case of unconsciousness or inability to release (*Check one*) ___ Myself ___ My Child, for medical treatment as a result of sustained injury, illness or accident on the Get Real Ministries Mission Trip/Activity, I _____ give my permission to Get Real, its staff, representatives and all attending health care professionals (*including, but not limited to RN's, LPN's, Physicians Assistants, Doctors and Paramedics*) to administer medical treatment, hospitalize, anesthetize or perform surgery as required.
 I, _____, do agree to hold harmless, acquit and release Get Real Ministries, Inc. and its representatives from all actions, damages or liabilities arising from the treatment of any accident, injury or illness incurred during the mission trip/activity. This release indicates that Get Real Ministries incur no liability whatsoever for any sustained injury/ accident or while attempting to meet all medical needs required during the trip.
 Participant's Signature/Guardian _____ Date ___/___/___