

WISCASSET CHRISTIAN ACADEMY

MEDICAL NEEDS STUDENT CONSENT AND RELEASE FORM

Student Name: _____

Address: _____

Name of Emergency Contact: _____

Primary Telephone: _____ Secondary Telephone: _____

Allergies, illnesses, or medications: _____

Physical restrictions: _____

If my child has medical conditions which may be relevant to a physician in the event of an emergency, I have listed them above. In the event an emergency occurs, I may be reached at the telephone number listed. If I cannot be reached within a reasonable period of time, I hereby authorize WCA staff/administration to make emergency medical decisions for my child. If there are any activities I do not want my child to be involved in, I have listed them above.

I, the undersigned parent or guardian, hereby further acknowledge that Wiscasset Christian Academy DOES NOT provide medical staff/personnel, including but not limited to school nurses. I understand and agree that my child will be responsible for administering all of his/her own necessary medications and that the administration of medications WILL NOT be monitored by school officials.

I understand and hereby agree to assume all of the risks which may be encountered in connection with the medical needs of my child. I do hereby agree to hold Wiscasset Christian Academy and its agents and employees, harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property, even injury resulting in death, which I now have or which may arise in the future in connection with my child's medical needs.

I expressly agree that this release, waiver and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of Maine and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This medical needs release contains the entire agreement between the parties hereto, and the terms of this release are contractual and not a mere recital.

I further state that I have carefully read the foregoing release and know the contents thereof and I sign this release as my own free act. This is a legally binding agreement which I have read and understand.

Signature: _____ Date: _____

Parent/Guardian

Pick-up Authorization

Student Name(s): _____

Names of those authorized to transport above listed student(s):

Parent: _____
signature printed name

Driving Permission

Students who hold a valid driver's license are welcome to drive themselves to and from school and applicable school activities.

As outlined in the school handbook, this is a privilege that may be revoked if the student does not follow specific guidelines listed below.

1. Students must abide by all state and local driving laws.
2. Students may not give other students rides without written permission from both the parent of the driver and parent of the passenger.
3. Mixed groups are not permitted to ride together.
4. Students are not allowed to loiter in their vehicles when parked on campus.
5. A copy of the student's driver's license and insurance card must be attached to this form.

Student's name: _____

My above listed child is authorized to give the following students rides:

Parent: _____
Signature printed name

STATEMENT OF COOPERATION & LIABILITY WAIVER

Attendance at WCA is a privilege and I agree to abide by all policies and rules set forth by the school in the Student Handbook. I assume full responsibility for all financial obligations agreed to with the school. If financial obligations are not met or a payment arrangement has not been satisfied, my child could be suspended or withdrawn. The administration is given discretion in the discipline of children as outlined in the Student Handbook (including matters that need to be addressed before or after school hours). Dismissal may result at any time when our child demonstrates conduct that is not in harmony with the school's rules.

I agree to cooperate with school faculty/staff in a positive and supportive manner to resolve any conflicts that may occur within the school. I will require my child to perform all duties and responsibilities entrusted to him/her by the classroom teachers or school administrator to the best of their ability.

I understand that my child will be taught biblical doctrine in accordance with the Bible Baptist Church of Wiscasset which includes encouraging a decision of salvation. At no time will we show disrespect to these doctrines within the classroom, school, home, or with other school families.

If I sue Wiscasset Christian Academy, the administration, faculty, staff, or others involved with this ministry and lose, I agree to pay all court costs and attorney fees incurred by the ministry and its personnel.

I give permission for my child, whose name is set forth below, to take part in all activities, including without limitations, transportation to and from school, sports activities, field trips, and school-sponsored trips away from the school premises. I indemnify and save Wiscasset Christian Academy, Bible Baptist Church, its employees, and agents harmless from and against any claims, demands, causes of action, liability, medical payments, costs and attorneys' fees resulting from or arising out of the participation by my child in the above-mentioned activities. I understand that Wiscasset Christian Academy does not provide medical insurance coverage for my child and that I will be solely and fully responsible for any medical expenses or other liabilities incurred.

I give permission for Wiscasset Christian Academy to use pictures taken of my child in publications, newspapers, newsletters, its website and/or television for purposes of public relations for Wiscasset Christian Academy. Wiscasset Christian Academy shall also have the right to use any portion of any statement made by my child in any publication, newspaper, newsletter, or website.

This Statement of Cooperation and Waiver of Liability shall remain in effect for as long as my child listed attends Wiscasset Christian Academy, whether it be in the elementary, junior-senior high, or summer school. Any reference herein to "child" shall include and refer to the child listed below beside "Student's Name:"

Student's Name: _____
Print

Father's Signature: _____
Signature Print

Date: _____

Mother's Signature: _____
Signature Print

Date: _____