

## DODGEBALL LIABILITY & MEDICAL RELEASE FORM 2023

Player Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Emergency Contact Name, Number, and Relation: \_\_\_\_\_

\_\_\_\_\_

Medical Conditions and medicines currently on: \_\_\_\_\_

\_\_\_\_\_

Health Insurance Provider, Member ID, and Holder: \_\_\_\_\_

\_\_\_\_\_

### Terms and Conditions

I hereby give my permission and approval for my child to participate in the Saturday Night Dodgeball League February 2023. I assume all risks and such hazards incidental to such participations, and I hereby release Calvary Church of the Nazarene and Houston Levee Community Center from any and all liability arising from injury or injuries sustained by my child while participating in the dodgeball tournament. Neither Calvary Church of the Nazarene or Houston Levee Community Center bear responsibility for any damage to any person or property.

I hereby authorize volunteers of Calvary Church of the Nazarene to obtain medical care for injuries that might affect my child or which might occur during the tournament. I further direct all medical or hospital facilities to accept this document as authorization to render emergency care to my child should it be deemed necessary.

Parent Name: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_