

St John Baptist De La Salle
SWIM TEAM LIABILITY/MEDICAL RELEASE FORM

I as parent and/or guardian of _____ release and discharge St. John Baptist De La Salle Church, School or C.S.D. or any pool that the De La Salle Swim Team may use for practice, from any liability for injuries and/or illness of any nature whatsoever occurring to my said child while in the care of the swim team of St. John Baptist De La Salle during the year of 2015. This release from liability extends to injuries and/or illness which may occur in the future as a result of said activities.

In this regard the undersigned on behalf of said minor waives provisions of the civil code of the State of California, sections 1541 and 1542 Eq. Seq.

The undersigned parent and/or guardian do hereby consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital services that may be rendered to said minor under the general/special instructions of the De La Salle Swim Team whether such diagnosis or treatment is rendered at the office of said physician or at a licensed hospital. We further authorized said physician to exercise their discretion in authorizing the disposal of any severed tissue or member.

It is understood that consent is given in advance of any specific diagnosis or treatment being required but is given to encourage team coaches, and said physician to exercise their best judgment as to the requirements of such diagnosis or treatment.

This consent shall remain effective from 6/2015 to 11/2015 unless sooner revoked in writing, delivered to said physician or said persons entrusted with the custody of said minor.

Mother's Name			
Address:		City:	Zip
Home Phone:		Wk Phone:	
Cell Phone:		E-mail:	

Father's Name			
Address:		City:	Zip
Home Phone:		Wk Phone:	
Cell Phone:		E-mail:	

Child's Name	Date of Birth	Child's Name	Date of Birth

Hospital: _____ Ins. Co. _____

Allergies: _____ Policy No: _____

Dr. Name: _____ Phone No: _____

Address: _____ City: _____ Zip: _____

Signature _____ Print Name _____ Date _____