

Penn West Conference
Annual Meeting
California University, California PA
June 8-9, 2018

Medical/Assumption of Risks and Permission Slip

Name of youth participant:_____

Does this person have any serious medical problems (i.e., asthma, allergic to drugs, heart ailment, epilepsy, diabetes, physical handicaps, emotional problems, or dietary restrictions)? If "Yes," please describe:

YES NO

Is this person taking any medication?

YES NO

If "YES," list names, dosage, why taken, and any side effects:

Should there be any limits on physical activity?

YES NO

At the present time, is this person under a physician's care?

YES NO

Is this person covered by medical insurance?

YES NO

Name of Insurance Company:_____Policy number:_____

Is pre-authorization necessary from your insurance company for emergency services?

YES NO

If so, what is the phone number of the insurance company?(____)_____

Parents: If this person is below the age of legal consent, (18 years) the law requires that we have your permission to give medical service should the need arise. Please read carefully and sign below.

I authorize medical examination and treatment as may be deemed advisable by the physician or staff member in attendance. For major illnesses or injuries, an attempt to contact me before institution of treatment will be made, unless such treatment is so urgent it must be done before contact can be made. If I cannot be reached, I authorize the attending physician to act as medical judgment may dictate. I also agree to assume any financial responsibility for my child's care. I understand that there are inherent risks to my child by participating at this event, even with the best of circumstances. With such knowledge, I hereby accept such risks. Having read all of the above information, I hereby give permission for my son/daughter to attend Penn West Conference Annual Meeting.

Signed:_____ Today's date:_____

(Parent or Guardian)

Emergency phone number: (____)_____

Sign and return to Penn West Conference: 312 S. Maple Ave., Greensburg, PA 15601 prior to May 27

Youth Covenant: "I promise to support and abide by the "Youth Covenant" while I attend the Annual Meeting at University of California, California, PA."

Signed:_____

(all participants must sign here in order to attend this Annual Meeting)