



Diocese of Trenton

### Medical Treatment Authorization and Emergency Contact Form

As parent and / or guardian of \_\_\_\_\_, a minor, I hereby, authorize the treatment by a qualified and licensed medical doctor in the event of a medical emergency which, in the opinion of the attending physician, may endanger my child's life, cause disfigurement, physical impairment or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me. I further authorize that my child may be transported to a hospital or emergency clinic for treatment.

Athletes Name: \_\_\_\_\_ Sport: \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_ Email address \_\_\_\_\_

Daytime phone# \_\_\_\_\_ Evening Phone# \_\_\_\_\_ Cell Phone \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone # \_\_\_\_\_

Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_

Date during which release is granted: From \_\_\_\_\_ To \_\_\_\_\_

### IMPORTANT

Indicate specific medical allergies, chronic illnesses, or other medical conditions that coaches and medical personnel should be aware of:  
 \_\_\_\_\_  
 \_\_\_\_\_

Are you allergic to any drugs? \_\_\_\_\_ If so, what? \_\_\_\_\_

Do you have any other allergies? (e.g. bee stings, dust) \_\_\_\_\_

Do you have \_\_\_\_\_ asthma \_\_\_\_\_ diabetes, or \_\_\_\_\_ epilepsy? (check any that apply)

Are you on any medications? \_\_\_\_\_ If so, what? \_\_\_\_\_

Do you wear contacts? \_\_\_\_\_ Other? \_\_\_\_\_

### Name of persons to contact in case of emergency:

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

Relationship to Child: \_\_\_\_\_ Daytime Phone# \_\_\_\_\_ Evening Phone # \_\_\_\_\_

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

Relationship to Child: \_\_\_\_\_ Daytime Phone# \_\_\_\_\_ Evening Phone # \_\_\_\_\_

This release form is completed and signed of my own free will for the sole purpose of authorizing medical treatment under emergency circumstances in my absence.

Signature \_\_\_\_\_ Notarized by: \_\_\_\_\_ Date: \_\_\_\_\_