

CHAOS LOCK-IN

DECEMBER 15, 2017

Hey 7th and 8th graders, here's your chance to stay up all night for some epic fun, food, and games. Come out to Riv's Westside Venue for a night you don't want to miss!

Arrive at 10:00pm on Friday, December 15.
Event ends at 7:00am on Saturday, December 16.

Riv's Westside Venue
7533 W. St. Joe Hwy
Lansing, MI 48917

Email chaos@rivchurch.com with any questions.

Fill out the registration form below and the medical consent form on the back and bring it with you to the Lock-In.

REGISTRATION FORM

(DON'T FORGET THE CONSENT FORM ON THE BACK)

NAME _____

AGE _____ GRADE _____ CIRCLE ONE: M F

ADDRESS _____

CITY _____ STATE _____ ZIP _____

SCHOOL _____

PARENT'S NAME (PRINTED) _____

PARENT'S PHONE _____

PARENT'S EMAIL _____

STUDENT'S PHONE _____



PARENTAL CONSENT & MEDICAL AUTHORIZATION FORM

PARTICIPANT'S NAME _____ AGE _____ DATE OF BIRTH _____

STREET ADDRESS _____

CITY _____ STATE _____

PARENT/GUARDIANS' CELL PHONE _____

PARENT/GUARDIAN'S HOME PHONE _____

EMERGENCY CONTACT'S NAME & PHONE _____

DOCTOR'S NAME & PHONE _____

MEDICAL INSURANCE COMPANY _____ POLICY # _____

CURRENT MEDICATIONS _____ YEAR OF LAST TETANUS SHOT _____

ALLERGIES OR MEDICAL CONDITIONS _____

TO WHOM IT MAY CONCERN:

I, the undersigned parent or legal guardian do hereby give permission for my child, _____, to attend and participate in _____ event sponsored by Riverview Church.

I authorize an adult, in whose care the minor has been entrusted, to consent to any x-ray examination, anesthetic, medical, surgical, or dental diagnosis or treatment, and hospital care, to be rendered to the minor due to the general or special supervision and on the advice on any physician or dentist, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization. Should it be necessary for my child to return home due to medical reasons otherwise, the undersigned shall assume all transportation costs.

The undersigned does also hereby give permission for my child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in events sponsored by Riverview Church.

The undersigned does also hereby give permission for photo and video of my child to be posted to rivchurch.com, Riverview Church's Facebook page, or similar social media sites. Any photographs or videos will only be used to promote Riverview Church ministries, and used by Riverview Church staff and/or leaders.

SIGNATURES:

PARTICIPANT _____ DATE _____

PARENT OR LEGAL GUARDIAN _____ DATE _____

