



Mountain View Lutheran Church

11002 S. 48th Street • Phoenix, AZ 85044 • 480-893-2579 • www.mvlutheran.org

Activity Registration and Release

Please complete this form, sign it, then submit to the appropriate Guide/Leader.

Please **PRINT** Clearly

TRIP/ACTIVITY NAME	
TRIP/ACTIVITY DATE	
Student Name	
Parent/Guardian Name	
Address (street)	
City/State/Zip	
Home Phone	
Cell Phone	
Emergency Contact Phone	
List all Allergies	
Other Comments/Concerns	
<i>Insurance Information (Optional)</i>	
Insurance Company Name	
Insurance Policy Number	
Insurance Contact Phone Number	

I/we (parent and/or guardian) _____ authorize representatives of Mountain View Lutheran Church (MVLC) to proceed in any and all medical procedures necessary for (name of child/student) _____. I/we also acknowledge that my child will participate at their own risk and we will not hold MVLC or any representative of MVLC liable for any injuries, including paralysis and death.

Parent and/or Guardian Signature

Date

Any scholarship needs, questions, or concerns may be directed to Colin Noonan at 480-893-2579 ext. 115.