



Beulah Baptist Institutional Church
 Rev. Alan Harris, Lead Servant
 “We Are a Movement, and Not a Monument”
 Emerging Generation Ministry (EGM)

Student Enrollment & Emergency Contact Information Form
Page 1 of 4

Parent | Guardian Name: _____ Relationship: _____

Parent | Guardian Name: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip _____

Contact #'s H: _____ Cell: _____ Cell: _____

EMAIL: _____ EMAIL: _____

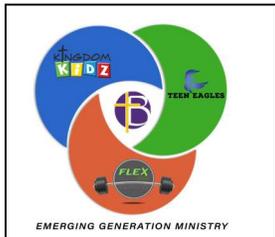
Student Name	Date of Birth	Grade	Relationship to Child

Name of Insurance Company: _____

Hospital Preferred: _____

List Health Issues that we should know about: _____

List Medication/Allergies/Food Allergies: _____



BEULAH BAPTIST INSTITUTIONAL CHURCH
 1006 WEST CYPRESS STREET
 TAMPA, FLORIDA 33606
CHURCHADMIN@BBICTAMPA.COM
 CHURCH HOURS: TUESDAY – FRIDAY 10:00AM – 3:00PM
“WHERE THE MOVEMENT BEGINS”



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EGM Ministry Group Participating:

- Kingdom Kidz
 Teen Eagles
 Youth Ushers
 Youth Choir
 Youth Media
 Youth Events & Field Trips
 Youth Programs (AWANA, Ladies of Distinction, Boys 2 Men, Teen Empowerment)

**Parental/Legal Guardian Consent Form, Liability Waiver & Medical Consent
 (Youth Under 18 and Individuals 18 Years or Older and in High School)**

In the event of a medical emergency and the person(s) listed above cannot be contacted, I (We) authorize Beulah Baptist Institutional Church and its agents (Leaders, Volunteers, Members) to act on my behalf for the necessary treatment or hospital care. I hereby waive and release Beulah Baptist Institutional Church and its representatives from any and all claims and liability arising out of the foregoing. that I understand that in the case of illness of my child, Beulah Baptist Institutional Church will try to notify me. I hereby warrant to the best of knowledge, my child is in good health, and I assume all responsibility for the health of my child. In in the event of an emergency, I hereby give permission to transport my child to a hospital/clinic for emergency medical or surgical treatment. In the event of an emergency and you are unable to reach me, contact the person(s) I have listed as emergency contact(s) on the back of this form.

Parent | Guardian Signature _____ Date _____

Parent | Guardian Signature _____ Date: _____



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Consent & Liability Waiver

I, the undersigned and give my voluntary consent to allow my child to participate in any and all educational programs, events and /or religious field trips in or out of town sponsored by Beulah Baptist Institutional Church during the time period January 2024 – December 2024. I acknowledge that Beulah Baptist Institutional Church is providing transportation only from the Church’s property to and from the event and back. I acknowledge and assume the risk of this transportation for my child. My child must comply with Beulah Baptist Institutional Church and EGM rules and procedures. By granting this permission, I also waive any claims against, and RELEASE AND HOLD HARMLESS AND INDEMNIFY, Beulah Baptist Institutional Church and any of their employees, volunteers, agents and representatives from any liability, claims, demands and causes of action arising out of or relating to any loss, damage or injury sustained in connection with or arising out of my child’s participation in the program(s).

Parent| Guardian Signature _____ Date _____

Parent| Guardian Signature _____ Date _____



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Student | Parent Photograph & Video Release Form

I hereby grant permission to the rights of my image, likeness and sound of my voice as recorded on audio or video tape without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my image or recording. I also understand that this material may be used in diverse educational settings within an unrestricted geographic area.

Photographic, audio or video recordings may be used for the following purposes:

- conference presentations • educational presentations or courses • informational presentations
- on-line educational courses • educational videos

By signing this release, I understand this permission signifies that any and all photographic and/or video recordings of me may be electronically displayed via the Internet or in the public educational setting. I will be consulted about the use of the photographs or video recording for any purpose other than those listed above. There is no time limit on the validity of this release nor is there any geographic limitation on where these materials may be distributed. This release applies to photographic, audio or video recordings collected as part of the sessions listed on this document only.

By signing this form, I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational purposes. If this release is obtained from a presenter under the age of 19, then the signature of that presenter’s parent or legal guardian is also required.

 Check Here to have this release to apply to all my children participating in, with BBIC (Beulah Baptist Institutional Church, Emerging Generation Ministry including but not limited to all Groups, Programs, Activities and Field Trips| Events.

Parent| Guardian Signature _____ Date _____

Parent| Guardian Signature _____ Date _____



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