LUTHER COLLEGE PARENTAL CONSENT FORM FOR MEDICAL TREATMENT

In the event of serious illness or accident, every effort will be made to contact the parent or guardian. However, if the delay of medical or surgical treatment would be detrimental to the health of the student, authorization for consultation and treatment by area physicians is requested.

PLEASE NOTE: ALL MEDICAL EXPENSES INCURRED ARE THE RESPONSIBILITY OF THE PARENT/GUARDIAN.

NAME OF FAMILY PHYSICIAN Dr. Omar

PHONE 563-424-2025

Does this student have a physical handicap, medical condition, any allergies or diet restrictions?

YES NO X

If yes, what provisions should be allowed for?

LIST OF CURRENT MEDICATIONS N/A

DATE OF LAST TETANUS BOOSTER 3/19/14

DOES YOUR CHILD WEAR GLASSES OR CONTACT LENSES? YES NO X

Permission is hereby granted to any duly licensed dentist, physician and/or surgeon to perform emergency dental, medical or surgical service for

Chloe Kelly

Name of Student

Emily Kelly

Signature of Parent/Guardian

Luther College Environmental Outreach Programs

Discovery Camps/Kindergarten

LIABILITY DISCLAIMER

I (parent/guardian name), Emily Kelly, do hereby indemnify, defend, and save harmless the Board of Regents of Luther College and their officers, employees, and agents from and against all loss or expense (including costs and attorney’s fees) by reason of liability imposed by law upon them for damages because of bodily injury including death at any time resulting therefrom sustained by any person or persons or on account of damages to property, including loss of use thereof, whether caused by or contributed by the Board of Regents of Luther College, Decorah, Iowa.

Student’s Name (please print) Chloe Kelly

PARENT or GUARDIAN MUST SIGN:

Parent

Emily Kelly

Guardian

Emily Kelly

Date 3/20/16

**I hereby give permission for images of my child, taken during regular Luther College sponsored activities through video, photo and digital camera, to be used only for the purposes of Luther College promotional materials and publications, and waive any rights of compensation or ownership thereto.

Parents Signature

Return to: Environmental Outreach, Luther College, 700 College Drive, Decorah, IA 52101