



Youth Medical Release Worksheet

2024 WELS International Youth Rally

June 25-28

Colorado State University, Fort Collins

HERE IS YOUR GOD!

ISAIAH 40:9

Youth: Gather this information for online registration.

Youth Name: _____

Parent or Guardian: _____

Emergency Contact Phone Number: _____

Other Emergency Contact: _____

Other Emergency Contact Phone Number: _____

Family Physician: _____ Physician Phone: _____

Insurance Carrier: _____ Insurance Plan #: _____

Insurance Policy #: _____

Allergies (insect, food, drug, etc.):

Please indicate anything that would be helpful to know to avoid or address any medical situation that might arise:

Are there any concerns about the participant that would prevent him/her from participating in any part of the 2024 WELS International Youth Rally activities? Please explain:

Does the participant take any prescription medication that we should know about in case of emergency? Please explain: