



MT. BETHEL CHRISTIAN
ACADEMY

a 2018 National Blue Ribbon School

Visiting Student Medical Information & Waiver

I grant permission to a representative of MBCA to secure proper medical/dental treatment for my son/daughter, (Name) _____ (Grade) _____, in the event of a medical emergency, provided MBCA is unable to communicate with me and if, according to his/her professional judgment, further delay might jeopardize the welfare of my son/daughter. Accordingly, I absolve and hold harmless MBCA, its Board of Trustees (as a body or individually), and any school employee in regard to any and all liability relating to said treatment. Further, I understand that I am responsible for providing the primary medical insurance for my child and for payment of any medical expenses for my child that are incurred and not covered by other insurance.

Medical History (Please check all that apply):

* Asthma _____ * Allergies _____ * Diabetes _____ * Seizures _____

* Other _____

If you checked any of the above, give a brief description: _____

Routine Medications/Inhalers: _____

Will your student need to take medication while visiting MBCA: No _____ Yes _____

- Visitors who carry an epi-pen, inhaler, or diabetic medications must provide to the MBCA Nurse a signed doctor's note stating they may self-carry and self-administer those medications.
- Parents/Guardians must complete the Medication Administration Authorization Form (www.mtbethelchristian.org/campus-life/forms) for any medications to be given by the nurse while on a scheduled visit at MBCA. Any prescription medications must be turned in to the nurse in the original container with the prescribing physician's directions on the container. Any other medications should also be given to the nurse in their original container.
- Visitors with severe allergies must provide MBCA with an appropriate treatment plan.
- Doctor's notes, Medication Authorization Forms and treatment plans can be sent to the School Nurse prior to the visit or can be delivered directly to the Clinic the morning of the visit. The MBCA School Nurse can be reached at 678-202-4057.
- I understand that according to HIPPA and FERPA Privacy Rules, my child's clinic records are considered education records, are subject to FERPA Privacy Rules, and may be shared with other MBCA personnel per the professional judgment of the registered nurse for the health, safety, and educational benefit of my child.

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Printed Name: _____

Emergency Contact Number: _____