

**PLEASE ENSURE THIS FORM IS FILLED OUT COMPLETELY
WITH MEDICAL (MANDATORY)/DENTAL POLICY NUMBERS
SO YOUR CHILD CAN BE TREATED IF INJURED**

***NAVAL JUNIOR RESERVE OFFICERS TRAINING CORPS
(NJROTC)
STANDARD RELEASE/MEDICAL EMERGENCY FORM***

Date: _____

I, _____ being the legal parent/guardian of _____ a member of the Naval Junior Reserve Officers Training Corps, in consideration of the continuance of his/her membership in NJROTC and/or his/her acceptance for NJROTC training, do hereby release from any and all claims, demands, actions, or causes of action, due to death, injury, or illness, the government of the United States and all its officers, representatives, and agents acting officially or otherwise and also the local, regional, and national Navy officials of the United States, and the U.S. Naval Reserve Officers Training Corps and its officers and officials.

I hereby authorize personnel of the Department of Defense, Armed Forces, Public Health Service, or civilian physicians to render such medical and dental care as may be necessary and medically indicated in the case of my son/daughter during his/her period of training, as is deemed necessary by a qualified practitioner.

I understand that care at a military medical facility for non-military dependents will normally be rendered on a temporary (emergency) basis only; further care is indicated, the patient will be transferred to non-military care as soon as possible. Emergency care provided to cadets who are not military dependents at a military medical facility may be subject to reimbursement, and I may be billed for the care provided. For Navy or Marine Corps sponsored activities, such care is authorized by NAVHEDCOMINST 6320.3B.

My son/daughter/ward has been determined to have the following allergies:

He/she requires medication for the treatment of:

Below are listed any other medical conditions which my son/daughter/ward is known to have, which would preclude or limit in any way his/her participation in physical exercise and athletic programs.
