

PARENTS PERMISSION / MEDICAL RELEASE
Concord Baptist Church of Jefferson City, MO

Youth's Name _____

Age _____ Birth Date _____ Gender (M) (F)

If Guest / Guest of Who? _____

Parent or Guardian _____

Address _____

City _____ State _____ Zip _____

Student Email: _____ Cell Phone _____

Parent Email: _____ Home Phone _____

Cell Phone (mother) _____ Cell Phone (father) _____

Contact Person (other than parent/guardian):

Name _____ Relationship to Student _____

Home Phone _____ Cell Phone _____

Address _____

City _____ State _____ Zip _____

Personal Physician:

Name _____ Phone _____

Necessary medical information that would hinder your full participation in the event or be helpful to a physician, if you require medical attention at any time (drugs presently taking, rare blood type, allergies to drugs, etc.): _____

Immunization status and date (Tetanus, etc.): _____

Insurance Information:

Medical Insurance Co. _____

Policy/Group # _____ **Copy of insurance card attached**

Medical and Surgical Waiver

The person described on this registration form has my permission to engage in all activities and events for the dates listed herein, except as noted by me. If a medical emergency should arise while my youth is at or in transit to and from the above listed activity or event and I cannot be reached, I hereby consent and give my permission to the Children's Pastor or representative of Concord Baptist Church to select a physician and/or hospital for my youth's care. I hereby also give the physician and/or hospital, as selected by the Children's Pastor or representative of Concord Baptist Church, permission to hospitalize, treat, and to order injections, anesthesia, or surgery for my youth who is named herein, which may in their sole discretion be necessary and proper under the circumstances.

I do hereby release, acquit, discharge and covenant to hold harmless the Concord Baptist Church and its representatives (the Children's Pastor or ministry staff) of any and all actions, damages, liabilities arising out of the treatment of any sickness or accident incurred by my said youth during the dates listed herein.

Parent / Guardian Signature

Relationship

Publicity Waiver

On occasion Concord Baptist Church – Children's Ministry takes photographs or makes an audio or videotape recording of students and/or adults involved in church activities. Such photographs or video records may be used by staff and participants to remember the activities and participants. In addition, such photographs and audio/visual records may be used by Concord Baptist Church-Children's Ministry publications or advertising materials or social media to let others know about our ministry. In addition, local news organizations may hear of our activities or events, and our church may invite or allow them to photograph or record our events for news reporting on special interests features. I consent to the use of any (appropriate) such audio or visual record of the student named above to be used, distributed or displayed as agents of the church see fit. This consent includes but is not limited to: photographs, videotape, and audio recordings (appropriate in nature). Furthermore, I give permission for the child to be interviewed by the news media, or for such photographs and other audio or visual records to be used by the news media.

- o Yes, you have my permission to include my student's photos.
- o No, I do not want my student's photos to be included.

Signature of Parent or Legal Guardian

Date

EVENT RELEASE FORM

PLEASE COMPLETE THE FOLLOWING INFORMATION:

TODAY'S DATE _____

EVENT NAME _____

PARTICIPANT'S NAME _____

BIRTH DATE _____ GENDER (M) (F)

In consideration of the issuance of a license to me by one or more Releasees or the acceptance of my application for entry in the above event, I hereby freely agree to and make the following contractual representations and agreements.

I ACKNOWLEDGE THAT BY SIGNING THIS DOCUMENT, I AM ASSUMING RISKS, AND AGREEING TO INDEMNIFY, NOT TO SUE AND RELEASE FROM LIABILITY THE ORGANIZER OF THIS EVENT, THE HOST CHURCH OR FACILITY, THEIR RESPECTIVE EMPLOYEES, STAFF, AGENTS, INSURERS, EMPLOYEES, VOLUNTEERS, MEMBERS, CLUBS, OFFICIALS, SPONSORS, EVENT DIRECTORS, LOCAL ASSOCIATIONS, AND AFFILIATES, (HEREINAFTER COLLECTIVELY "RELEASEES"), AND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. THIS RELEASE IS A CONTRACT WITH LEGAL AND BINDING CONSEQUENCES AND IT APPLIES TO ALL EVENTS AND ACTIVITIES REGARDLESS WHETHER OR NOT LISTED ABOVE. I HAVE READ IT CAREFULLY BEFORE SIGNING, AND I UNDERSTAND WHAT IT MEANS AND WHAT I AM AGREEING TO BY SIGNING. I ACKNOWLEDGE THAT THE EVENTS AND ACTIVITIES MAY BE INHERENTLY DANGEROUS AND I FULLY REALIZE THE DANGERS OF PARTICIPATING AND I FULLY ASSUME THE RISKS ASSOCIATED WITH SUCH PARTICIPATION INCLUDING, by way of example, and not limitation: dangers associated with man-made and natural fields or facilities; the dangers of falling, collision, transportation in or about vehicles, contact from or with other participants, and fixed or moving objects; the dangers arising from equipment failure, inadequate safety equipment, and use of equipment or materials provided by the event organizer and others, **THE RELEASEES' OWN NEGLIGENCE**, the negligence of others and weather conditions; and the possibility of serious physical and/or mental trauma or injury, or death associated with the events or activities. For myself, my heirs, personal representatives, administrators, legal representatives, assignees, and successors in interest, (hereinafter, collectively "Successors"), **I HEREBY WAIVE, RELEASE, DISCHARGE, HOLD HARMLESS, AND PROMISE TO INDEMNIFY AND NOT TO SUE** the Releasees and all sponsors, organizers and promoting organizations, property owners, church, law enforcement agencies, public entities, and properties that are in any manner connected with this event or activities, and their respective agents, officials, and employees through or by which the event will be held, (the foregoing are also collectively deemed to be Releasees), **FROM ANY AND ALL RIGHTS AND CLAIMS INCLUDING CLAIMS ARISING FROM THE RELEASEES' OWN NEGLIGENCE TO THE MAXIMUM EXTENT PERMITTED BY LAW**, which I have or which may hereafter accrue to me and from any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of, my participation in or association with the event, or travel to or return from the event. I agree it is my sole responsibility to be familiar with the events, necessary participation and agenda, the Releasees' rules, and any special requirements or regulations for the event and activities and agree to comply with all such rules and regulations. I understand and agree that situations may arise during the event, which may be beyond the control of the Releasees, and I must continually act and otherwise participate to endanger neither others nor myself. I accept responsibility for the condition and adequacy of my equipment, any equipment provided for my use, and my conduct in connection with this event. I will wear a helmet or other safety equipment if necessary which satisfies the requirements of the Releasees' rules or regulations and that can protect against serious head or other bodily injury, and assume all responsibility and liability for the selection of such a helmet and equipment and any modifications or attachments thereto. I have no physical or medical condition, which would endanger others or myself if I participate in this event, or would interfere with my ability to safely participate in this event. I agree, for myself and my Successors, that the above representations are contractually binding, and are not mere recitals, and that should I or my Successors assert a claim contrary to what I have agreed to in this contract, the claiming party shall be liable for the expenses (including legal fees) incurred by the Releasees in defending the claims. This contract may not be modified orally, and a waiver or modification of any provision shall not be construed as a waiver or modification of any other provision herein or as a consent to any subsequent waiver or modification. I consent to the release by any third party to Releasees and their insurance carriers of my name and medical information that may relate solely to any injury or death I may suffer arising from the event. Every term and provision of this contract is intended to be severable. If any one or more of them is found to be

unenforceable or invalid, that shall not affect the other terms and provisions, which shall remain binding and enforceable.

I ATTEST THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER (OR THAT IF I AM YOUNGER , MY PARENTS OR LEGAL GUARDIAN HAVE EXECUTED THIS WAIVER BELOW), AND THAT I AM PHYSICALLY FIT AND SUFFICIENTLY TRAINED TO PARTICIPATE IN ALL ACTIVITIES ASSOCIATED WITH THE PROGRAM OR EVENTS AND MY PARTICIPATION IN SUCH PROGRAM OR EVENTS IS VOLUNTARY.

Signature of Entrant Over the Age of Eighteen (18)

AGE CONSENT AND RELEASE OF PARENT OR GUARDIAN

I am the parent or guardian of _____(Child). My Child is fit for the event, and I consent to my Child's participation. **I HAVE READ AND I UNDERSTAND THE ABOVE CONTRACT.** In consideration of allowing my Child to participate, I consent to the contract and agree that **ITS TERMS SHALL LIKEWISE BIND ME, MY CHILD,** and our heirs, legal representatives, and assignees. **I HEREBY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS THE RELEASEES FROM EVERY CLAIM AND ANY LIABILITY** that I or my Child may allege against the Releasees (including reasonable legal fees and costs) as a direct or indirect result of injury or death to me or my Child because of my Child's participation in the event, **WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERS TO THE MAXIMUM EXTENT PERMITTED BY LAW. I PROMISE NOT TO SUE RELEASEES** on my behalf or on behalf of my Child regarding any claim arising from my Child's participation in the event. I grant permission for my son/daughter/other minor ward to be transported for the activities/events including out-of-town trips. In the event of an emergency requiring medical attention, I expect every reasonable attempt to be made to contact me. In case I cannot be reached, I grant permission for any immediate treatment deemed necessary by the attending physician and transfer of my son/daughter/minor ward to a qualified medical facility. This authorization does not cover major surgery unless formally decreed prior to surgery by two licensed physicians or dentists.

Signature of Parent or Guardian if Child is Less Than Eighteen (18)

Concord Baptist Church of Jefferson City, MO

Covenant of Community Expectations

The following rules and guidelines are equally binding on adult leaders/chaperones and youth.

NON-NEGOTIABLE RULES

Any participant failing to abide by these rules will be sent home immediately at personal/family expense.

- No use of illicit drugs or alcohol
- Presence at and full participation in all group activities, including adherence to curfews and other time-related instructions
- No sexual misconduct (defined as exposure, touching, or inappropriate reference to body areas normally covered by undergarments)
- Must be in assigned rooms by designated time
- Coed visitation only in assigned community room
- Smoking, vaping, and the use of tobacco products are not allowed to, from, or during any trip.
- Will not break any American laws in the United States or any other country.

GUIDELINES FOR LIVING IN CHRISTIAN COMMUNITY

- Adults and youth will be equally responsible for performing assigned tasks in a timely and cooperative manner.
- Participants will be respectful, encouraging, and will maintain a positive attitude toward others at all times, recognizing Christ's presence in each other.
- Participants will be respectful of both common living spaces and the property of others.
- Participants will avoid the use of foul language, cursing, or any speech (including "humor"), which puts down, makes fun of, or stereotypes other persons or groups.
- Sleeping areas for males and females will be separate.

Youth Participant's (or Adult Leader's) Statement:

By signing this form, I pledge to honor God and respect others during this activity by following the rules and guidelines printed above. I understand that I cannot participate in the activity unless this completed form is on file.

Youth Participant's or Adult Leader's Signature

Date

Parent/Guardian's Statement:

By signing this form, I agree to support the Covenant of Community Expectations printed above, and will accept responsibility for the payment of my child's return transportation should s/he break one of the non-negotiable rules.

Parent/Guardian's Signature

Date