

Southminster Presbyterian Church
YOUTH PARTICIPATION FORM 2021-2022

Student Information

First Name _____

Last Name _____

Nickname _____

Street Address _____

City, State, Zip _____

Home Phone _____

Student Cell Phone _____

Student Email _____

Date of Birth _____

Grade _____

School _____

Parent/Guardian Information

Parent/Guardian 1 _____

Same Address as Student? _____

Home Phone _____

Cell Phone _____

Email _____

Parent/Guardian 2 _____

Same Address as Student? _____

Home Phone _____

Cell Phone _____

Email _____

Emergency Contact (not Parent/Guardian)

Name _____

Relationship to Student _____

Phone 1 _____

Phone 2 _____

Physician Information

Primary Care Physician _____

Phone _____

Dentist _____

Phone _____

Medical Insurance Information

Company Name _____

Policy Holder's Name _____

Policy Number _____

Group Number _____

Medical Information

good swimmer fair swimmer non-swimmer

Does your student have allergies to:

food _____

medication _____

pollen insect bites other _____

Does your child currently, or have they ever, suffered from or been treated for any of the following:

asthma epilepsy/seizure disorder diabetes

heart problem frequent stomach upset

physical impairment _____

other _____

Date of last tetanus shot _____

List any current medications/dosages _____

Does your student wear: glasses contact lenses

(over)

COVENANT

Should this student's activities be restricted for any reason? Why?

Include any additional information that would help us effectively care for your child:

LIABILITY RELEASE: In consideration of Southminster Presbyterian Church allowing the above child to participate in youth ministry activities, I, the undersigned, do hereby release, forever discharge, and agree to hold harmless Southminster Presbyterian Church's directors, employees, volunteers, and agents from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the above child while involved in youth ministry activities. Furthermore, on behalf of my minor child, I hereby assume all risk of accidental personal injury, sickness, death, damage, and expense as a result of participation in activities involved therein.

MEDICAL TREATMENT PERMISSION: I, the undersigned, authorize an adult, in whose care the minor has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical or dental diagnosis or other treatment and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician, dentist or other medical provider on the medical staff of a licensed hospital or emergency care provider. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical or dental services rendered to the aforementioned child pursuant to this authorization.

TRANSPORTATION PERMISSION: I DO DO NOT (check one) grant permission for a designated adult driver to transport my child to and from any and all off-site youth activities.

PHOTO/VIDEO PERMISSION: I DO DO NOT (check one) give my consent to Southminster Presbyterian Church to use photo or video images taken of my child(ren) on the website, social media, and in other church publications as they see fit. None of the photo or video images will be for personal use.

STUDENT COMMITMENT

I _____, agree to the following in order to participate in the Southminster Presbyterian Church Youth Ministry Program:

- I will arrive on time and come with an open mind and heart.
- I will be respectful of all staff, adult leaders and my peers.
- I will be respectful of the property and pick up after myself.
- I will follow directions and willingly participate in discussions and activities.
- I will not come to the gatherings under the influence of alcohol or drugs.
- I will not bring any drugs, illegal substances, contraband, weapons, cigarettes/vapes or inappropriate visual materials to the gatherings.
- I will not threaten anyone, act violently or inappropriately, or use profane language.
- I will remain until the end of the gathering unless I have notified the leader in advance with a note from my parent / guardian.
- I will act in a Christian manner at all times and respect the opinions of others.
- I will adhere to the Electronic Communication Guidelines as outlined in the SPC Safe Church Policy (section III.C.), especially the prohibited use of any form of electronic communication with a leader or staff member which does not allow for some kind of record (such as Snapchat).
- I will attend at least 50% of Church School and/or Youth Group sessions in order to be eligible to attend retreats/mission trips.

If I violate any condition of this agreement, I understand that my parents / guardians will be contacted and will be required to pick me up immediately. I understand that I will not be permitted to future gatherings until my parents / guardians, youth ministry leader and I meet to discuss my future participation.

PARENT/GUARDIAN COMMITMENT

I, _____, agree to the following conditions for our son/daughter to participate in the Southminster Presbyterian Church Youth Ministry Program:

- I will discuss the above terms with my child.
- I understand that transportation to and from church activities is my/our responsibility.
- I will support the efforts of the Youth Ministry Leaders and will volunteer as I am able.
- I will pick my child up if called to do so immediately due to disciplinary action and agree to meet with the youth director to discuss my child's future participation.
- If my child must leave early, I will write a note stating the time for pick up and come to the door of the meeting place to meet him/her.
- I acknowledge the Safe Church Policy is available to view at www.spchurch.org and I recognize the importance of reading it and reviewing it with my child.
- I will ensure that my child attends at least 50% of Sunday School and/or Youth Group sessions in order to be eligible to attend retreats/mission trips.

Parent/Guardian Signature: _____

Date: _____

Student Signature: _____

Date: _____