

Parent/Guardian Consent, Liability, and Medical Form

Participant Name: _____

Health and Insurance Information

Medical Insurance Carrier: _____

Policy #: _____ Group #: _____

Address: _____

Name of Primary Insurance Holder: _____ DOB: __/__/__

Employer: _____

Participant medical concerns, allergies, dietary restrictions, chronic illness, or any other necessary information:

To Whom it May Concern:

The undersigned do(es) hereby give permission for our (my) child(ren):
_____ ("Participant"), to attend and participate in YOUTH
MINISTRY EVENTS sponsored by the Virginia Conference of The United Methodist Church.

Liability Release

In consideration of The Virginia Conference allowing the Participant to participate in children or youth ministry activities, we (1), the undersigned, do hereby release, forever discharge and agree to hold harmless The Virginia Conference, its directors, employees, volunteers and agents (collectively herein the "Church") 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 Participant while involved in the children/youth activities. We (I) the parent(s) or legal guardian(s) of this Participant hereby grant our (my) permission for the Participant to participate fully in youth ministry activities, including trips away from the church premises. Furthermore, we (I) [and on behalf of our (my) minor Participant(s)] hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein. Further, authorization and permission are hereby given to said Church to furnish any necessary transportation (within the limitations of church insurance and the law), food and lodging for this Participant. The undersigned further hereby agrees to hold harmless and indemnify said Church for any liability sustained by said Church as the result of the negligent, willful or intentional acts of said Participant, including expenses incurred attendant thereto.

Medical Treatment Permission

We (I) 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 treatment and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child or youth pursuant to this authorization.

Early Return Home Policy

Should it be necessary for our (my) child or youth to return home due to medical reasons, disciplinary action or otherwise, the undersigned shall assume all transportation costs and responsibility.

Transportation Permission

The undersigned does also hereby give permission for our (my) youth to ride in any vehicle driven by an approved ADULT chaperone while attending and participating in activities sponsored by The Virginia Conference. My child/youth and I understand that SEAT BELTS SHALL BE WORN AT ALL TIMES during transportation.

Participant Signature: _____ Date: _____

Parent(s)/Guardian(s) Signature(s): _____ Date: _____

Photograph and Publicity Release Form

I, _____(participant name), give the Virginia United Methodist Annual Conference permission to use my name, likeness, image, voice, and/or appearance as such may be embodied in any pictures, photos, video recordings, audiotapes, digital images, and the like, taken or made on behalf of Virginia United Methodist Annual Conference activities.

I agree that Virginia United Methodist Annual Conference has complete ownership of such pictures, etc., including the entire copyright, and may use them for any purpose consistent with Virginia United Methodist Annual Conference missions. These uses include, but are not limited to illustrations, bulletins, exhibitions, videos, reprints, reproductions, publications, advertisements, and any promotional or educational materials in any medium now known or later developed.

I acknowledge that I will not receive any compensation or remuneration for the use of such pictures, etc., and hereby release Virginia United Methodist Annual Conference and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

I have read and understood this consent and release.

I give my consent to Virginia United Methodist Annual Conference to use my name and likeness to promote Virginia United Methodist Annual Conference programs and/or their activities.

Participant Signature _____ Date: _____
Parent/Guardian Signature _____ Date: _____

I do not give my consent to Virginia United Methodist Annual Conference to use my name and likeness to promote their programs and/or their activities.

Participant Signature _____ Date: _____
Parent/Guardian Signature _____ Date: _____

Conduct Covenant

During the meetings and events under the sponsorship and guidance of the Virginia United Methodist Conference, I recognize that I am a representative of the Christian community and I am responsible for my actions. I understand that by signing this Covenant, I agree to abide by the following guidelines.

I will:

- Recognize that everyone in the group is a part of the Body of Christ. I will embrace inclusiveness by making sure that everyone feels welcome and important.
- Respect the physical and emotional well-being of myself and others. This includes refraining from foul play or violence, harmful jokes, respecting the need for sleep, etc.
- Respect the health of my own body and those around me by refraining from the use of tobacco, alcohol, vapes, e-cigarettes, and illegal drugs. I understand that the use of these substances is absolutely prohibited.
- Respect the things I use and the property of places I visit. The areas used for all events, including transportation, will be left clean.
- Participate fully in ALL scheduled group activities and abide by additional group guidelines.
- Act appropriately with other participants. This means no couples alone at any time and no public displays of affection.
- Follow all instructions given by group leaders and chaperones.
- Stay within the group or assigned sub-groups at all times. I will not wander off alone or leave the activity site unless granted permission by an adult and will report for all designated check-in times.
- Hold safety to the highest regard and refrain from compromising my own safety or the safety of another person.
- While I will work to provide a safe and trusting environment for my peers, I recognize that if a peer shares concerns about physical or emotional harm to themselves or others, I will notify an adult.

Guidelines for Consequences

Consequences will focus on restoring peace with reconciliation among the parties involved. The goal of resolving each problem will be growth and learning through repentance and forgiveness. Any problems encountered will be handled within the group and by the adult leaders to the extent that is possible. However, should a situation persist or become uncontrollable, the parent/guardian will be contacted and informed of the problem. Should the situation be urgent, the parent/guardian will be contacted immediately and will be responsible for picking up the youth from an event or providing for their transportation home.

Student and Parent/Guardian Signature

In signing this covenant, I vow that I have read and understand these guidelines. I recognize that a covenant is a binding promise, and my signature is testimony that I agree to adhere to the provisions of this covenant.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____