

2010 Mission Trip Registration

(Each church keeps its YOUTH FORMS)

Name: _____ Male/Female: _____ GR 2010-11 _____

Address: _____

City: _____ State: _____ Zip: _____

Birthday: _____ Home Phone: (____) _____

Email: _____

Home Church: _____ T-shirt size(circle): S M L XL XXL XXXL

Parents' Contact Information

Father's Name: _____

Address: _____

Phone #: (____) _____ Cell: (____) _____

Mother's Name: _____

Address: _____

Phone #: (____) _____ Cell: (____) _____

Emergency Contact (other than parent)

Name: _____ Phone: _____

Medical Information (attach copy of card)

Insurance: _____

Policy Holder: _____

Policy #: _____

Phone # of Insurance Company: (____) _____

Family Doctor's Name: _____ Phone: (____) _____

Please list any medications taken regularly, any dietary restrictions or physical limitations: _____

Allergies: Food, Drug, or Environmental: _____

Does your child have any other known medical conditions we should be aware of (such as asthma, diabetes, low blood sugar, seizures, etc.)? Yes _____ No _____

If yes, please explain: _____

Medical Release & Waiver of Liability

I give permission for my child to attend **2010 HOUSTON MISSION**. In case of illness or accident, I give permission to have my child evaluated and treated by available medical personnel. I understand a reasonable attempt will be made to notify me in such an event. The adults in charge have permission to authorize any medical care, which in their judgment, they deem necessary and to sign any medical forms necessary on my child's behalf, and I do hereby release St. John's Episcopal Church, Episcopal Diocese of Arkansas, St. Christopher's Episcopal Church, League City, TX, and each of the participating churches, and all persons connected with this event from any liability, claim, and expense related to any such condition, circumstance or treatment.

Parent Signature _____ Date _____

Our program and weekend is based on the Episcopal Baptismal Covenant:

We believe in God. We will seek to continue in the Apostles' teaching and fellowship, in the breaking of the bread and prayers. We will persevere in resisting evil and whenever we fall into sin will repent and return to Christ. We will proclaim by word and example the Good news of God in Jesus Christ. We will seek and serve Christ in all persons loving our neighbors as ourselves. We will strive for justice and peace among all people and respect the dignity of every human being.

Community Covenant:

We will be living in community for seven days and as such, we need to agree to some things that will make our life together run smoothly. Please read these expectations and sign at the bottom of the page. Adult sponsors will also sign the covenant.

I, _____ agree to the following community covenant:

- Sleeping areas are off limits to members of the opposite sex at all times.
- Do not bring offensive clothing.
- No inappropriate sexual activity.
- No alcohol, illegal drugs, tobacco products, fireworks, or weapons are allowed at anytime.
- No person is to leave during the event without permission from the event coordinator. (It is the expectation that youth will stay for the entire event.)
- Electronic devices: must bring headphones. (We discourage bringing electronics or anything valuable.) Use of such devices will be restricted to personal time and are not to be present on work sites.
- Full participation in all events is expected. If one does not feel called to participate in worship, presence and respect is still expected.

By signing below I agree that these are reasonable expectations and I will do everything I can to live up to them. If I choose to violate the rules set for the event, I understand that there will be consequences, which may include my being sent home

Signed _____ Date _____

As parent and/or legal guardian of this child I have read the above and believe that s/he is capable of aspiring to and following these community expectations and rules.

Signed _____ Date _____

PHOTOGRAPHS – I understand that pictures and videos of my child may be taken during this trip. I hereby give permission for the use of such pictures and videos to be used for the promotion and sharing of these among the participating churches. YES NO Signed _____ Date _____

- **Intention with a down payment of \$50.00 is due by May 30 to YOUTH LEADER of home church**
- Return this completed form along with the full/balance of \$150.00 BY 2 weeks before the trip.
- Make checks payable to your home church. Please put the name of the person you are paying for in the memo line.
- Please check with your church for Scholarships thru gh your priest or youth minister. If not, call or e-mail the youth office for partial scholarships before the event. All scholarship info is confidential.