



IT IS THE PARENT'S OR LEGAL GUARDIAN'S RESPONSIBILITY TO NOTIFY THE CHURCH OF ANY CHANGES THAT NEED TO BE MADE DURING THE PROGRAM YEAR.

Student Information

Student Full Name: _____ Preferred Name: _____

Pronouns: _____ DOB: _____ Grade: _____ School: _____

Student Email: _____

Activities/Sports they participate in: _____

Cell #: _____ Shirt Size: _____

Parent/Guardian Contact Information

Parent/Guardian 1 Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Cell #: _____

Email: _____

Parent/Guardian 2 Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Cell #: _____

Email: _____

Alternate Emergency Contact Information:

Name (Relationship) _____ Cell #: _____

Medical Information:

Student's Known Medical Conditions or Allergies: _____

My student should refrain from the following activities: _____

Insurance Company: _____ ID or Group #: _____

Name of Policy Holder and Relationship to Student: _____

Insurance Company Phone #: _____

Primary Care Physician: _____ Phone #: _____

Medication:

Medication Name: _____ Dose: _____ Time: _____

Dispensing & Storage Instructions: _____

Please put an "X" next to each medication you give approval for your child to be given while at youth or children's activities: ____ Sunscreen ____ Off! Insect Repellent ____ Tylenol ____ TUMS

Authorization to Participate and Participation Covenant Agreement:

I hereby give my consent for my minor child to participate in youth and children's activities at South Elkhorn Christian Church (Disciples of Christ). I understand that all reasonable safety precautions will be taken by the program leaders during each activity and that the possibility of an unforeseen hazard does exist. I further agree not to hold South Elkhorn Christian Church, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the minor listed on this form. Further, I have received and read the **Participation Covenant** and agree that my student will abide by the covenant. I will ensure that my student understands the covenant agreement and behaviors that are not acceptable. Students who do not follow the covenant agreement may be asked to leave early and/or may be unable to participate in future children/youth programs.

Initial**Authorization to Treat a Minor:**

I grant permission for my child to receive medical treatment, including but not limited to travel in an ambulance, x-ray, anesthetic, medical, surgical, or dental diagnosis or other medical treatment that may be deemed necessary for my minor child. Further, I understand that all efforts will be made to contact me prior to treatment. In the event I cannot be reached in an emergency, I give permission to the activity leader to make the decisions necessary for treatment. Should there be no activity leader available, I give permission to the attending physician to treat my minor child. I further understand that the doctors, dentists, and other providers attending to my child will take all reasonable safety precautions during their care.

Further, as a parent or legal guardian, I am responsible for the health care decisions of my minor child and agree that my insurance plan is the primary plan to pay for the dental, medical, or hospital care or treatment that is given to my child and assume the responsibility of all medical bills, if any.

Initial**Authorization for Transportation:**

I have read the South Elkhorn Christian Church **Transportation and Waiver Release** and I grant permission for my minor student to travel with South Elkhorn Christian Church (Disciples of Christ) Ministry staff or approved volunteers in personal or rented transportation to and from planned off-site activities following the policy outlined there. Activities for which we may provide transportation includes, but is not limited to: retreats, movie nights, bowling, caroling, day trips, camps, or mission trips.

Initial**Photo/Streaming Permission or Decline:**

I have received and read the South Elkhorn Christian Church **Photo and Streaming Policies**, and I grant permission for my minor student's photo to be used in accordance with those policies.

Initial

I have received and read the South Elkhorn Christian Church **Photo and Streaming Policies**, and I **DECLINE** for my minor student's photo to be used in accordance with those policies.

Initial

Parent/Guardian Signature: _____ Date: _____

Participation Covenant

All children and youth are expected to be active participants in the activities they attend and to be willing to be in community to support one another. In this spirit, Parents, Children, and Youth agree that students and leaders will:

1. Take part in the ministry fully, giving their best efforts.
2. Respect the other participants and treat others as they would wish to be treated.
3. No students – including those who drive – will leave any activity early without prior permission from a group leader.
4. Lunch will be provided. Students may bring their own packed lunch, but may not leave the premises to pick up lunch and come back once they have signed in for groups.
5. Students will not bring illegal substances to church groups or off-site activities. Illegal substances include but are not limited to: drugs, alcohol, cigarettes, or vapes/vape pens
6. Students will not bring weapons of any sort to church groups or off-site activities
7. Students may bring personal cell phones or iWatches, etc. but parents and students understand that for the active participation and health of the community, phones may be requested to be put in a safe storage location during the length of ministry activities.
8. All students will participate in creating and signing an annual covenant with their group each year outlining how they will be a part of the group and treat one another (kindness, listening to one another, etc.), This is in addition to this Participation Covenant for all participants.

Violations of the **Participation Covenant** may result in the child/youth or adult volunteer being unable to participate in future children/youth programs as outlined in South Elkhorn Christian Church's **Children and Youth Safety Covenant**.

Transportation Waiver and Release

Off-site activities and events are planned throughout the year for children's and youth groups. All transportation will follow the South Elkhorn Christian Church (Disciples of Christ) **Children and Youth Safety Covenant**. All drivers and accompanying adults will have passed a Background Check and students will be placed in vehicles with a minimum of 2 adults or with a driver and multiple youth. Transportation activities include but are not limited to: retreats, movie nights, bowling, caroling, summer day trips, church camp, or mission trips.

Further, I agree that I will not hold South Elkhorn Christian Church, its officers, agents, employees, assigns, or anyone acting on its behalf, responsible or liable for injury occurring to the named person during such activities or such travel.

1. I hereby accept financial responsibility for personal items lost by the person identified herein.
2. I authorize South Elkhorn Christian Church to transport and to obtain, through a physician of its own choice, any emergency medical care that may become reasonably necessary for the person during such activities/events or such travel and agree to accept the cost of the transportation and/or treatment by medical personnel or facility.
3. I accept full responsibility and hereby grant permission for me or my minor child to travel with South Elkhorn Christian Church.

Photo Consent Policy

South Elkhorn Christian Church, with a parent or guardian's permission, may use a child's likeness in a photograph taken at a Children's or Youth Ministry event, gathering, or activity in its publications including (but not limited to) brochures, newsletters, social media, and website pages, without payment or any other consideration. These materials will become the property of South Elkhorn Christian Church and will not be returned. I hereby irrevocably authorize South Elkhorn Christian Church to edit, alter, copy, exhibit, publish, or distribute this photo for the purposes of publicizing South Elkhorn Christian Church's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge South Elkhorn Christian Church from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I understand that South Elkhorn Christian Church will not publish my minor child's full name with the photo, unless approved by a parent or guardian.

Streaming Consent Policy

Youth and children will have the opportunity to lead parts of worship on some Sundays of the year. I understand that if my minor child accepts a leadership role, that the worship service will be streamed on our Facebook and web pages and my child's likeness will be streamed and available online. **This does not include the Children's Sermon, which does not stream visuals – only audio – each week.** These materials will become the property of South Elkhorn Christian Church and will not be returned. I hereby irrevocably authorize South Elkhorn Christian Church to edit, alter, copy, exhibit, publish, or distribute this video for the purposes of sharing or publicizing South Elkhorn Christian Church's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph. I hereby hold harmless and release and forever discharge South Elkhorn Christian Church from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.