

FIRST PRESBYTERIAN CHURCH ATHENS, TX
EMERGENCY INFORMATION & CONSENT FORM
Time Period: **July 22, 2018 to July 31, 2019**

Name of Participant: _____ Sex: ____ Age: ____ Date of Birth: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip Code: _____ Cell Phone: _____

T-Shirt Size Circle One Adult: S M L XL 2XL 3XL

IN CASE OF EMERGENCY CALL:

Name _____ Relationship _____
Primary Phone _____ Secondary Phone _____

ALTERNATE CONTACT:

Name _____ Relationship _____
Primary Phone _____ Secondary Phone _____

MEDICAL INFORMATION: Please list any medical conditions, learning disabilities, or special needs. (I.E.: allergies, ADHD, Gluten free, etc.)

Does the participant carry an EPI pen or Inhaler? ____YES ____NO

Please list any medications the participant is presently taking:

Family Doctor: _____ Phone: _____

Name of Insurance Company: _____ Phone: _____

Policy Number: _____ Tetanus Shot Current: ____Yes ____No

Please attach a copy of both sides of your insurance card

My child does not (I do not) currently have health insurance.

I/We understand that in the event medical intervention is needed, every attempt will be made to contact immediately the persons listed on this form. In the event I/we cannot be reached or the alternate contact person cannot be reached in an emergency I/we hereby give my/our permission to the physician selected by the activity leader to order emergency transportation, hospitalize, to secure medical treatment and/or to order an injection, anesthesia, or surgery for my child as deemed necessary.

I/We understand that all safety precautions will be taken at all times by First Presbyterian Church Athens, TX and its ministry partners during all events and activities. I/We understand the possibility of unforeseen hazards and know the inherent possibility of risk. I/We agree not to hold First Presbyterian Church Athens, TX, their leaders, employees, and/or volunteer staff liable for damages, losses, diseases, or injuries incurred by said child. Furthermore, I/We hereby assume all risk of personal injury, sickness, death, damage, and expense as a result of participation in recreation and work activities involved therein.

I/We understand that my insurance coverage for my/our child will be used as primary coverage in the event medical intervention is needed. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action, or otherwise, I/We hereby assume all transportation costs. If any information change before the time period is over I/we will do my best to inform the church of the change. By signing I/we agree to all the above and that the information on this form is correct to the best of my/our ability.

PARTICIPANT SIGNATURE _____ **Date** _____

PARENT/GUARDIAN'S SIGNATURE (IF UNDER 18) _____ **Date** _____

FIRST PRESBYTERIAN CHURCH ATHENS, TX
TRAVEL CONSENT FORM FOR MINORS

Time Period: July 22, 2018 to July 31, 2019

I hereby grant my permission for _____ (name of participant) to participate fully in the activities conducted under the auspices of the First Presbyterian Church Athens, TX. These activities would include, but are not limited to:

- **Participation in the Senior High Youth Connection (SHYC), Youthquakes, East Texas Youth Conference (ETYC), Mo Ranch Jr. High Jubilee, Synod Youth Workshop, PULSE Leadership Training Seminars, Kidquakes, VBS, etc.**
- **Participation in other activities that are planned or endorsed by the First Presbyterian Church Athens, TX**

Authorization and permission is hereby given to First Presbyterian Church Athens, TX to furnish any necessary transportation, food, and lodging, as deemed necessary, for this participant during the activities related to this event.

I/We understand that my insurance coverage for my/our child will be used as primary coverage in the event medical intervention is needed. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action, or otherwise, I/We hereby assume all transportation costs.

If at any point you would like to remove your consent for an event before the end of the above stated time period please contact the church office.

Parent or Guardian's Signature _____ Date _____

FIRST PRESBYTERIAN CHURCH ATHENS, TX
PERMISSION TO USE LIKENESS

I, _____ (parent/guardian), do hereby give my permission for my/my child's likeness and/or photograph to be used for informational and promotional purposes (print, video, multimedia, and internet) for the Youth Group of First Presbyterian Church Athens, TX.

First Presbyterian Church Athens, TX agrees to make every effort to protect the privacy and dignity of you/your children. We will never include biographical information in connection with you/your child's picture/likeness. (Full name, address, e-mail address, etc.) Additionally, if you or your dependent request that a picture be removed, it will be done so immediately. In the case of an internet picture, this will be done as soon as possible. In the case of a printed picture, this will be done the next time it goes to print.

Name of Participant _____

Parent/Guardian's Signature(if minor) _____
Date _____

First Presbyterian Church Athens, TX

Covenant of Conduct

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As a follower of Jesus Christ and His teachings, I covenant to follow these rules while at FPC Athens or at events in which I am representing FPC Athens:

- I will respect the leadership, staff, sponsors and other youth as children of God.
- I will build up the community and include all people in all activities.
- I will respect the confidentiality of others unless I feel their safety is an issue.
- I will always be welcoming and polite to all those around me.
- I will participate in the planned activities and try new things.
- I will not damage church property or the property of others and will report any and all property destruction to the event leader. I will reimburse the damaged party for any damages for which I am personally responsible.
- I will attend the entire event and will not leave without the permission of a sponsor. If I must leave an overnight event prior to its end time, I will have written permission from my parents.
- I will follow the curfew and lights out set by leadership during overnight events.
- I will not use electronic equipment (i.e. iPods, Videogames, cell phones, etc.) during church activities unless authorized by event leadership.
- I will not use profane language.
- I will not bring or use tobacco products, alcoholic beverages, illegal drugs, or weapons of any sort.
- I will not wear skimpy clothes or clothes with alcohol or tobacco product ads.
- I will not play practical jokes on others.
- I will not engage in sexual activity of any kind. This includes, but is not limited to, kissing and/or inappropriate touching.
- I will not threaten, harm or attempt to harm myself or others.

Participant Signature _____ Date _____

Parent/Guardian Signature(If under 18) _____ Date _____