



ST. DUNSTAN'S YOUTH MINISTRY
*Community Covenant, Permission to Participate,
Medical & Image Release Form*
Valid: September 1, 2016 through August 31, 2017

Name: _____
Last First Middle

PERMISSION TO PARTICIPATE & MEDICAL RELEASE

The above named youth has my permission to participate in all youth events and activities sponsored by St. Dunstan's Episcopal Church from September 1, 2016 through August 31, 2017. I understand that all reasonable safeguards will be taken but that St. Dunstan's Episcopal Church and the leaders of these events are not responsible for accidental injury. In case of medical emergency, I, the parent or legal guardian of the above named minor, hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under, the general or special supervision of any licensed medical personnel on the staff of and any licensed hospital. This authorization is given in advance of any specific diagnosis, treatment or hospital care required, but is given to provide authority and power to render care, which is deemed advisable in the best judgment of the physician.

Date: _____ Signature: _____

Parent/Guardian Name(s): _____

EMERGENCY CONTACT INFORMATION

Cell – Mother: (_____) - _____ Cell - Father: (_____) - _____

If we cannot be reached, please contact: _____

Phone: (_____) - _____ Relationship: _____

MEDICAL INFORMATION

Birthdate of Minor: _____ Date of last tetanus shot: _____

Family Physician: _____ Phone: (_____) - _____

Family Dentist: _____ Phone: (_____) - _____

Insurance Company: _____ Phone: (_____) - _____

Name of policyholder: _____

Policy # _____ SS#: _____

Any food or drug allergies: _____

Special Needs: _____

Medical Diagnoses or Medication: _____

Please read and sign the Community Covenant on the back of this document.

ST. DUNSTAN'S YOUTH MINISTRY
Community Covenant

Non-Negotiables

1. I will not bring or use alcohol, illegal drugs or tobacco products of any kind.
2. I will respect the property, needs and integrity of others; personally, sexually and racially; and agree not to participate in any inappropriate sexual or violent behavior.
3. I will not bring or use firearms, explosives, knives or fireworks.
4. I will not misuse or willfully damage the property of others or the facility or grounds of the host site.

Expectations

1. I will be present for the entire activity and participate fully in all scheduled activities including community chores.
2. I will not leave the host site or prescribed boundaries of an event without the permission of an adult advisor.
3. I will respect and abide by the schedule and expectations regarding curfew, quiet times, sleeping areas and equipment use.
4. Once arriving at an event my vehicle will be locked and parked in a designated area for the entirety of the event.
5. I will not use electronic equipment during programs, including cell phones or personal stereos, etc., as it is disruptive to the community, except when permission is granted.
6. I will bring an openness to grow in faith, meet new people and have fun.

I understand that the above agreements are designed to make this the best and safest youth program possible. I promise to adhere to these non-negotiable regulations and expectations while I am a participant at all events. I understand that if I choose to break the non-negotiables at any time during an event I will be removed from the community, my parents will be called and I will be sent home at my own expense. If I choose to break the expectations of an event, the leaders of the event will determine appropriate consequences.

I release St. Dunstan's Episcopal Church to record my/my child's likeness, via still photo, video, or audio recordings; for use as promotional material for the congregation. I understand that these recordings may be edited at the discretion of the congregation, and that they may be published in promotional videos, brochures, congregational newspapers, and congregational websites. I hereby waive all rights to compensation for the use of these recordings.

Participants Signature _____ Date _____

Parent/Guardian Signature _____ Date _____