



**First United Methodist Church
2017-2018
Youth Ministry Information Form**

Youth Information

Last Name: _____ First Name: _____
 Gender: M F Age: _____ Date of Birth: _____ T-Shirt Size: _____
 Address: _____ Apt. #: _____
 City: _____ State: _____ Zip: _____

Academic Grade: _____ Graduation Year: _____ School: _____
 Lunch Time: _____

Youth Cell #: _____ Text? Yes No E-Mail: _____

Prefer to be contacted by: Phone _____ Text _____ Email _____ Facebook _____

I agree to participate in the functions of Rutherfordton First united Methodist Church, to cooperate with the leaders and other young people, and conduct myself with a Christ-Centered attitude and behavior. I promise to respect God, others, property, and myself. If it becomes necessary for me to be sent home early from an event, it will be done at my parents' expense. I understand that my continued participation in church activities depends on my support of this agreement.

Signature of youth: _____ Date: _____

Parent/Guardian Information

Parent/Guardian's Name: _____
 Home Phone: _____ Cell: _____ Work: _____
 E-Mail: _____
 Prefer to be contacted by: Phone _____ Text _____ Email _____
 Do you check your e-mail regularly? Yes No

Parent/Guardian's Name: _____
 Home Phone: _____ Cell: _____ Work: _____
 E-Mail: _____
 Prefer to be contacted by: Phone _____ Text _____ Email _____
 Do you check your e-mail regularly? Yes No

Health Insurance Information

Insurance Company _____ Policy/Group Number _____
 Name of person in which insurance is carried _____
 Medical Doctor: _____ Phone: _____
 *Comments or Other Special Information (medical needs, allergies, etc.): _____

Emergency Contact (other than parent): _____
 Home Phone: _____ Cell: _____ Work: _____

First Aid and Medical Treatment: I hereby give permission for the Rutherfordton First united Methodist Youth Leaders, assigned chaperones, or agents to seek and secure any medical attention or treatment for my child needed as a result of accident, illness, and other health conditions or injury, including hospitalization, if the agent's opinion such need arises. In doing so, I give permission for any attending physician(s) and other medical personnel to administer as any Needed medical treatment, including surgery and I agree to pay all fees and costs arising from this action to obtain medical treatment.

Authorization & Media Release

- Yes**, Rutherfordton First United Methodist Church may post photographs and/or videos of my child on the church website and/or the church/Youth Facebook Page or use photographs and/or videos of my child in their publications.
- No**, I ask that Rutherfordton First United Methodist Church not post photographs and/or videos of my child on the church website and/or the church/Youth Facebook Page or use photographs and/or videos of my child in their publications.

Functions and Activities: It is my understanding that participating in the programs and recreational AND OTHER ACTIVITIES AT Rutherfordton First United Methodist Church is a privilege. Prior to my participation in such activities, I acknowledge that there are certain risks associated with the activities, including, by way of example, physical injury due to activity-related accidents, physical injury due to transportation-related accidents, illness or even death. In addition, I acknowledge that there may be other risks inherent in these activities of which I may not presently be aware.

Special Events & Field Trips: I understand the child named above may be participating in the local service projects and fellowship events during church youth events. I understand that during this period my child/ward may take part in activities such as: minor yard work, cleaning, painting, and other services consistent with the purposes of the church.

Informational Notes: All drivers during youth ministry-related events must be 21 years of age with a good driving record. All drivers of the church van must be 25 years of age and must meet the requirements of our insurance company. While we understand that some older youth may drive themselves to and from events, we will not give youth permission to ride home with other youth without permission or confirmation from the parents themselves.

General Waiver and Liability Release

By signing this Permission/Waiver Form, I expressly warrant that my child named above is capable of withstanding both the physical and mental demands of the activities discussed above. I also expressly assume all risks of the child participating in the activities, whether such risks are known or unknown to me at this time. I further release Rutherfordton First United Methodist Church, its ministers, leaders, staff, volunteer leaders, or agents from any claim that my child may have or that I have against them as a result of injury or illness incurred during the course of participation in these activities. This release shall exclude any gross claims of negligence. This release is also intended to cover all claims that members of the child's or my family or estate, heirs, legal representatives, successors, and assigns may have against Rutherfordton First United Methodist Church or its ministers, leaders, staff, volunteer leaders, or agents. I further agree to indemnify and hold harmless Rutherfordton First United Methodist Church, its ministers, leaders, staff, volunteer leaders, or agents from any and all claims arising from my participation in its activities and programs, or as a result of injury or illness or my child during such activities.

For Use only if the participant is a Minor

I represent that I am the parent/guardian of _____ who is under 18 years of age. I have read the above permission/waiver form and am fully familiar with the contents thereof.

I give my permission for the child named above to participate in the activities of Rutherfordton First United Methodist Church, including any special events/activities described above. I understand that if my child/ward violates the Youth agreement below and must be sent home early from an event, it will be done at my own expense. In consideration for allowing participation of the child in the activities of Rutherfordton First United Methodist Church, I hereby agree to the Permission/Waiver Form, on behalf of the child, and agree that This Permission/Waiver Form shall be legally binding upon me, my family, heirs, legal representatives, successors, and assigns.

Signature of Parent/Guardian: _____

Date: _____

Print name of Parent/Guardian: _____

Disclaimers