

St. James United Methodist Church Ministry

PLEASE FILL OUT **FRONT AND BACK**

Authorization and Medical Release Form May 2018 – May 2019

Name: _____ Adult _____ Student _____

Address: _____ City/State: _____ Zip: _____

Gender: M or F Age: _____ Birthdate: _____ Grade: _____ School: _____

Best Email: _____ Best Phone: _____ Are You On Facebook: Y or N

Emergency Contact Information

Person No.1: _____ (Relationship): _____

Phone: (work) _____ (home) _____ (mobile) _____

Best Email: _____ Cell Phone Carrier: _____

Person No.2: _____ (Relationship): _____

Phone: (work) _____ (home) _____ (mobile) _____

Best Email: _____ Cell Phone Carrier: _____

Medical/Health Information

Known Allergies/Medical Issues (including health & physical restriction & Recent Surgeries): _____

Date of Last Tetanus Shot: _____ Blood Type: _____

List all medications (including over the counter) currently being taken: _____

(Note: If medication is to be taken during the event, please bring it in original container along with instructions)

Medical Insurance Co: _____ Policy No: _____

Please attach a copy of the insurance card to this form.

Covenant of Conduct

As a student or adult taking part in this event/activity, I agree to uphold the following:

1) Love God 2) Love One Another 3) No Whining

- **Show Love For Others At All Times:** Don't put others down, make fun of people (including strangers or those who aren't with our group), or hurt or pick on others. *"Love your neighbor as much as you love yourself."* (Matthew 22:39)
- **Let Others See Jesus Through You:** As a participant in this event you are representing this ministry to the rest of the world. We want to be a positive witness for Jesus, so please refrain from swearing, yelling out the window of vehicles, making faces at others, wearing offensive clothing (showing body parts), avoid using drugs and alcohol, and so on. *"Don't copy the behavior and customs of this world, but be a new and different person with a fresh newness in all you do and think. Then you will learn from your own experience how His ways will really satisfy you."* (Romans 12:2)
- **Respect And Take Care Of Things/Property of Others:** We need to take care of and respect all buildings & vehicles we use. If you make or see a mess, please clean it up. *"We are each responsible for our own conduct."* (Galatians 6:5)
- **Know When To Be Goofy & When To Be Serious:** It is very important that we all have FUN on this trip. It is also important that we all listen and participate during Bible studies or other "serious" times. *"When the Holy Spirit controls our lives, he will produce this kind of fruit in us: love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-*

control.” (Galatians 9 5:22-23)

- **Play Safely:** You are important to God, to your church, to those organizing this event and to your family. We want you to be safe, so please follow all rules (including using seatbelts when traveling) and use common sense. Remember, your actions affect others as well as yourself. **“Follow the Lord’s rules for doing his work, just as an athlete either follows the rules or is disqualified and wins no prize.” (Psalm 119:9)**
- **Focus On The Things Of God:** Remember, what you put in your brain stays in your brain. For all children’s ministry events, please leave all electronic devices - including cell phones - at home (unless you receive specific permission to bring it.) **“...Fix your thoughts on what is true and good and right. Think about things that are pure and lovely, and dwell on the fine, good things in others. Think about all you can praise God for and be glad about. ” (Philippians 4:18)**
- **Love One Another:** There will be times when you will share hugs & affection with your Christian brothers and sisters. Some display of affection can, however, make others uncomfortable. Also, remember: no boys or girls inside the opposite gender sleeping areas when applicable. **“If you keep yourself pure, ...your life will be clean, and you will be ready for the Master to use you for every good work.” (2 Timothy 2:21)**
- **Keep A Positive Attitude:** Be willing to have a good attitude and participate in the various activities. The fastest way to destroy an activity is to whine, complain or refuse to take part in things. **“A cheerful heart does good like medicine, but a broken spirit makes one sick.” (Proverbs 17:22)**

This covenant is between the parents/guardians, the participant (student or adult) and God. In signing this covenant the parents/guardians and the participant (student or adult) are aware of all information on this expectation statement and agree to abide by it.

Authorization to Consent to Treatment & Release of Liability

I/We understand that St. James United Methodist Church (the "Ministry") carries medical and hospitalization insurance coverage which, consistent with the exclusions, limitations and terms thereof, may provide benefits over and above any personal medical and hospitalization coverages available to my family.

I/We understand that any personal medical and hospitalization insurance available to my family will provide primary coverage and the Ministry's medical and hospitalization coverage (subject to the exclusions, limitations, and provisions in the Ministry's policy) may provide secondary or excess coverage. I agree to apply first for benefits from the personal hospitalization and medical coverages available to my family, if any, before applying for benefits that may be available from the Ministry's medical and hospitalization coverage.

I/We further understand that in the event my child requires medical or dental treatment while engaged in the event reasonable efforts will be made to contact me; however, if I cannot be reached I hereby consent and give permission to the Ministry's sponsor or any adult counselor acting on behalf of the Ministry with respect to the Event, as agent for me, to consent to any X-ray examination; injections; anesthesia; medical; dental or surgical diagnosis and treatment; and hospital care and treatment advised and supervised by a physician, surgeon, or dentist (as appropriate) licensed to practice under the laws of the state where the services are rendered, either as an outpatient or in any hospital.

I/We authorize the disclosure by the health care provider to third parties (including a representative of St. James UMC) of HIPAA protected health information.

To the best of my knowledge, I have listed either above or on the attached Permanent Medical Information File, all of my child's medical allergies, medications being taken, medical problems and other pertinent information. My child has permission to participate in all prescribed activities associated with this Event except as noted by me.

I further release and agree to indemnify and hold harmless the Ministry and any of its members, employees or agents from any liability, injury, damages or loss whatsoever related to the planned participation or involvement of my child in the event.

I/We understand that I, or my child, may be traveling in 12 passenger vans, 15 passenger vans, people movers, buses, or personal vehicles of adult leaders representing St. James UMC.

I/We understand that students participating in St. James UMC activities are expected to conform to the rules of conduct, outlined in the **covenant of conduct**. This includes, but is not limited to: students are expected to participate in all activities and respect the church property; students will not be allowed to possess or use alcohol, tobacco or drugs; be allowed to use profanity, obscenity or vulgarity; and will be expected to abstain from wearing offensive or immodest clothing.

I/We understand that I/we will be responsible for all costs if my/our student needs (or I need, as an adult leader) to be sent home for disciplinary reasons, and have discussed this information with my/our student. He/She agrees to abide by the ministry expectations.

_____ Participant’s Signature: Student _____ Date

_____ Participant’s Signature: Adult _____ Date

_____ Parent/Guardian of Named Minor Signature _____ Date

PERMISSION TO USE IMAGES AND VIDEO OF MINOR

I/we understand the photographs and videos taken during St. James UMC events will be used for publicity purposes in both print & online means, including social media. Identity (names) of minors will not be published.

_____ Participant’s Signature: Student _____ Date

_____ Participant’s Signature: Adult _____ Date

_____ Parent/Guardian of Named Minor Signature _____ Date