

CONSENT FOR TREATMENT

I, the undersigned, hereby give permission for my son/daughter to participate in youth group events and activities. I authorize any adult representative of First Lutheran Church who is acting in a leadership role to consent to and authorize the administration and performance of all treatments that may be considered advisable or necessary in the judgement of attending physicians, in the event that the above named participate should be admitted to any hospital, or be in need of any medical treatment. This authorization shall continue for such time as the participant is involved in the youth activity, or travel to and from the event. I take full responsibility for all charges and fees related to treatment.

I understand that the care and safety of the participant will be primary in all planned activity and that all attempts will be made to contact parents/guardians if an emergency or accident should happen.

RELEASE FOR ATHLETIC ACTIVITIES

I, the undersigned, am aware that my son/daughter will be engaged in physical activities involving various sports which could cause injury to him or her. My son/daughter is voluntarily participating in these activities and I assume all risk of injury that might result. Exceptions for activity are noted on the other side of this form.

Representatives of First Lutheran Church will make NO evaluation or recommendation whether your son/daughter is physically fit for any physical activities. If your son/daughter has any physical condition that may impair their ability to participate in these activities, it is your responsibility to obtain a physician's statement describing the limitations to participate in the program. It is always advisable to consult your son's/daughter's physician prior to undertaking any physical exercise program.

WAIVER OF CLAIMS

I hereby agree to waive any claims or right that I might otherwise have to sue First Lutheran Church, its employees, officers, or agents for injuries that might occur as a result of these activities. I will not hold First Lutheran Church liable for personal items that are lost or stolen on the church premises.

RELEASE FOR CHURCH PUBLICATIONS

First Lutheran Church has my permission to use my son's/daughter's picture in church publications, including but not limited to brochures, newspaper releases, highlights in the church newsletter and the website, and the youth directory. Some basic information may accompany the picture from the student information.

COVENANT OF YOUTH MINISTRY PARTICIPATION

I have reviewed the points to the "Covenant of Participation" with my son/daughter (Student Information Form) and I encourage him/her to follow this covenant.

I HAVE READ, UNDERSTAND AND AGREE TO THE ABOVE STATEMENTS!

Signature of parent/guardian and date

This waiver is valid from September 2007 until September 2008. Medical information will be kept confidential among adult leaders. Originals will be kept on file at First Lutheran Church. Photocopies are to be considered like the original.

PLEASE SIGN
PLEASE SIGN

YOUTH MINISTRY COVENANT OF PARTICIPATION

- ☺ Do not put another person down... uphold mutual respect for one another.
- ☺ Participate in all activities unless physically unable.
- ☺ Respond positively to appropriate requests by adults.
- ☺ Be on time and ready to go for the whole schedule.
- ☺ Get up when called and go to bed when it is time to sleep.
- ☺ For safety sake... stay in groups when in public areas.
- ☺ Do not bring and or use alcohol, tobacco or non-prescription drugs. Let adult leaders know of any medication you are taking.
- ☺ Do not use bad language. Leave behind CD's with bad language.
- ☺ Respect and care for the property of others.
- ☺ Respect the property of other places we might visit.
- ☺ Leave places better than we found them. (Clean-up)
- ☺ Please do not wear clothing that advertise companies that sell alcohol, tobacco or are sexually suggestive or negative.
- ☺ NO sexual acts, sexual assault, sexual harassment and sexual innuendos.
- ☺ NO racism, racial slander or put-downs because of color or ethnicity.
- ☺ NO put-downs or slander of people that are physically or mentally challenged.
- ☺ It is easy to get separated... listen and learn emergency rendezvous points.
- ☺ Remember you are baptized... God loves you... you are God's own.
- ☺ Follow the example of Christ and love others... you know... take up your cross!

**Christ answered in regards to the greatest commandments...
"Love neighbor as self and God with your whole being! Matt 22:37ff**

Respect others. Sexual acts, sexual assault, sexual harassment and sexual innuendos WILL NOT BE TOLERATED! Only appropriate touching like a friendly hug... and only when welcomed and approved by both people... is acceptable.

If you are approached and uncomfortable by someone's actions or words, state your feelings, ask the person to stop, move to be with other people and report the event to an adult. Adults will listen, we will act, and we will not blame the victim. Sexual assault is defined as sexual activity without consent or permission. This can include observation, touching or penetration. It might seem innocent to watch the girls in the hotel window across the street who are changing or talking about a boy's body, but this is harassment. Do not degrade one another, either behind one's back or to their face.

Sexual innuendos and jokes are commonplace on television and in the movies. Racism and put-downs of people who are physically and mentally challenged is still a part of the American culture. Just because something is popular does not mean it is right. Do not reduce people to an object. Lift up people as the incredible creation God has brought into being... body, mind and soul.

I have reviewed and will follow the Covenant of Youth Ministry Participation.

Signature of student participant and date

Student: _____ Phone: _____

-Member of First Lutheran or -Friend of _____

Grade during 2007-08: -5 -6 -7 -8 -9 -10 -11 -12

School: _____

Birth date: _____ -female, -male

Cell Phone: _____

Can we send you FLY information by text message on your cell phone? -YES -NO

E-mail address: _____

Can we send you FLY information at your e-mail address? -YES -NO

Address: _____

City & Zip: _____

Parent(s)/Guardian(s): _____

Work phone: _____ Cell Phone: _____

** if applicable ** 2nd Parent : _____

Address: _____

City & Zip: _____

Home phone: _____ Work or Cell Phone: _____

Other Emergency Contact: _____

Relationship: _____ Phone: _____

Physician: _____ Phone: _____

Insurance Co: _____

Insurance ID #: _____

*** Please submit a copy of insurance cards. ***

Medical info: -diabetes, -asthma, -epilepsy, -allergies

Medications: _____

List any medical information that would affect your child's participation:

*** PARENT & STUDENT SIGNATURES ON BACK! ***

Interests/Clubs:

Sports/Teams:

Do you play a musical instrument? -YES -NO

If yes, what instrument?

Do you sing? -YES -NO

If yes, -solo -group, what part?

Do you help with ministries in the church, ie: Sunday School teacher, usher...?

What other organizations do you belong to, ie: Scouts, 4-H, club sports...?

Does your family have a policy with THRIVENT FINANCIAL FOR LUTHERANS. -YES -NO



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