

need for adult assistance):

ST. ANDREW'S EPISCOPAL CHURCH

6509 SYDENSTRICKER ROAD 🕆 BURKE, VA 22015

Youth Event Permission/Medical Form

EVENT NAME:			EVENT DATE(S):				
EVENT							
			DULT		Н		
NAME	:					GOES	BY:
	Last	First		Middle			
BIRTH	DATE: / /	AGE: GRA	DE:	ΟM ΟF	EMAIL: _		
HOME	ADDRESS:						
	CITY:		STATE:	ZIP:	C	ELL:	
PAREN	NT/GUARDIAN:				Rela	TIONSHI	? TO YOUTH:
EMAIL:			CELL: HOME:				
PAREN	NT/GUARDIAN:				Rela	TIONSHI	P TO YOUTH:
EMAIL:			CELL: HOME:				
FMFR	GENCY CONTACT (OTHER THAN	PARENT/GUARDIAN) [,]					
	,	. ,			RELATION	NSHIP TO	PARTICIPANT:
EMAIL	:	(CELL: HOME:				
PHYSI	CIAN:				OFFICE P	HONE:	
MEDICAL INSURANCE COMPANY:			POLICY #:				
-	DE COPY OF MEDICAL INSURANCE		-	-			
	K THE FOLLOWING AREAS C		-	-		. , .,	
handica	•	our child has experienced	l and of whic	h the staff should	l be aware. D	escribe what,	t, illness, propensity, weakness, limitatior if any action of protection is required or es that must be taken.
1. Fc	or this participant's safety and	our knowledge, th	nis particip	ant is a:			
	Good Swimmer		Fair Swim				Non-Swimmer
2. D	oes this participant have aller	gies to:					
	Pollens		Food				Other
	Medications		Insect Bit	es			
	oes this participant suffer fror	n, or has ever expe	rienced, o	r is being trea	ated currer	ntly for an	y of the following:
	□ Asthma		Diabetes				Headache/Migraine
	Epilepsy / Seizure DisordHeart Trouble	ler 🗆	Frequently Upset Stomach Physical Handicap				Eating Disorder Other
- -	ate of last totanus chot						
	ate of last tetanus shot:						(1
5. Pl	iease list ALL medications, bot	in prescription and	over-the-	counter, the p	participant	is taking	(type/dose/frequency and any

- 6. Please list and explain any major illnesses the participant has experienced during the last year:
- 7. Please list any dietary restrictions:
- 8. Should this participant's activities be restricted for any reason? Please explain:

COMMUNITY COVENANT FOR ALL ST. ANDREW'S EPISCOPAL CHURCH YOUTH EVENTS

In an attempt to establish a Christian community during our events, the following guidelines will govern our time together for the duration of this event. The success and enjoyment of our experience in Christian fellowship will largely depend upon our mutual responsibility to one another, our parish family and to God. In that spirit, you are asked to affirm your willingness to support the following rules of conduct:

- 1. As Christians, all youth and adults have a responsibility to the environmental settings where our events are held including buildings grounds, furnishings and natural wildlife. Youth and advisors will be held financially responsible for damages they incur.
- 2. All youth should remain in buildings or areas designated by group leaders and not stray off on their own.
- 3. All youth will participate in all group activities unless given express permission by an adult sponsor or adult staff member to do otherwise.
- 4. All participants, youth and adults, will dress appropriately. It is not suitable for males or females to wear clothes that expose undergarments (bras, boxers, etc.). A participant may be asked to change clothes if an adult decides that their attire is inappropriate.
- 5. Participants may possess electronic devices for use on transportation to/from group event s. If they are brought, devices will be secured and kept safe by staff for the duration of the event.
- 6. Participants will show consideration and respect for others and other cultures. Lights out, quiet times and prayer times are a few examples of when to demonstrate your thoughtfulness and silence. Please note that offensive language is not considerate or respectful to your community or to others.
- 7. Alcohol, illegal drugs, artificial stimulants (Vivarin, NoDoze, etc.), and abuse of over-the-counter medications will not be tolerated. Sharing over-the-counter or any other medications (e.g. aspirin, Tylenol, ibuprofen, cold remedies) is strictly prohibited.
- 8. Use of any tobacco product is prohibited.
- 9. Persons are not allowed to enter opposite-sex rooms at any time during any event. Inappropriate displays of affection or sexual activity are not permitted.
- 10. No youth will be released prior to the close of an event without parental consent. If question of legal guardianship arises, consent is required from both parents.
- 11. I will always do my best to uphold the values of St. Andrew's Church and recognize that I am a representative of my parish and my family.
- 12. Participants who do not follow these guidelines may be asked to leave the events and parents may be called.

Activities may include, but are not limited to: cookouts, boating, water skiing, swimming, basketball, roller skating, rollerblading, games in the park, soccer, broomball, ice skating, volleyball, softball, baseball, camping, downhill skiing, snowboarding, hiking, biking, concerts, Bible studies, prayer, golfing, miniature golf, hayrides. Note: If you desire to limit your child's participation in any event, please submit your wishes in writing to the church youth pastor prior to that event.

<u>I give permission</u> for myself / my child to travel with St. Andrew's Episcopal Church, to and from the above event. In case of illness or accident, I give permission to have my child evaluated and treated by available medical personnel. I understand a reasonable attempt will be made to notify me in such an event. I also understand that no obligation or responsibility in regard to rendering treatment or medication is assumed or undertaken as a consequence of this activity; notwithstanding, <u>the adults in charge have permission to authorize any medical care</u>, which in their judgment, they deem necessary and to sign any medical forms necessary on my child's behalf. I do hereby release St. Andrew's Episcopal Church, and all persons connected therewith from any liability, claim and expense related to any such condition, circumstance or treatment.

We, the parent and participant, have read the rules of conduct, the above health evaluation, and permission to participate in youth group activities. My participant agrees to abide by the stated personal limitations and community covenant.

Participant Signature:	Date:
Parent/Guardian Signature:	Date:
Parent/Guardian Signature:	Date:
Witness Signature:	Date:
Rector Signature:	Date:
THIS APPLICANT IS: ACTIVE IN THE CHURCH A FRIEND OF ANOT	HER PARTICIPANT