

MIDDLE SCHOOL YOUTH



NOVEMBER 9-11, 2018
(leaving after school Friday and
returning at 4:30 PM on Sunday)

VA CONFERENCE RETREAT

**To CAMP EAGLE EYRIE,
Lynchburg VA**

COST: \$150

CUMC youth will join hundreds of other youth from the Virginia United Methodist Conference in a weekend set aside just for 7th & 8th graders to worship together, learn and grow together and have fun in the wooded setting of Camp Eagle Eyrie. The theme for the weekend is based on Ephesians 3:19: "Extra. Ordinary. Love."

Teaching sessions will be led by Rev. Joe Varner, pastor of Thalia UMC in

To register for this event, turn in a completed forms (Permission, Parental Consent & Liability Release, Youth Covenant of Conduct, and Emergency Care Form) to the church office along with a \$50 deposit by Sunday, October 7.

Please contact Kara with any questions: kstuebing@centreville-umc.org

MIDDLE SCHOOL YOUTH



**Centreville UMC
Middle School Retreat
to Camp Eagle Eyrie**

November 9-11, 2018

Permission Form

Name of Participant: _____

Phone Number for a Parent during event: _____

Emergency Contact Name: _____ **Phone:** _____

I give my son/daughter permission to attend the weekend retreat to Camp Eagle Eyrie in Lynchburg, VA November 9-11, 2018. I give him/her permission to travel to/from all events with staff and volunteer drivers for this retreat. Additionally, I have completed the emergency care form on the reverse side or have an emergency care form on file with the church.*

Parent Signature: _____ **Date:** _____

***Please note, you do not need to fill out the emergency care form on the reverse side if you have a form that has been completed and is on file.**

Centreville United Methodist Church ~ Emergency Care Form
Youth (less than 21 years of age) Participant Form ~ January 1, 2018 - December 31, 2018

Full Name of Participant (Print clearly) _____

Name of Parent/Guardian: _____ Email Address: _____

Phone (Cell) _____ (H): _____ (W) _____

Street Address: _____

City/State: _____ Zip: _____ Date of Birth _____

Emergency Contact other than parent: _____

Contact Phone: (Cell): _____ (H) _____ (W) _____

Personal Physician: _____ Phone _____

Medical conditions (diabetes, allergies, etc.): _____

Required medications (including non-prescription) and dosage

Date of last Tetanus Shot: _____ Date of last physical: _____

Medical Insurance Co.: _____ Policy No.: _____

Insurance Company Phone No.: _____

Release of All Claims

I, being 21 years of age or older (on behalf of my child who is not 21 years of age), do hereby release, discharge and agree to forever hold harmless CUMC, the directors, officers, employees and agents thereof, from any and all liability, claim and demand for personal injury, sickness and death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned while participating in the above-named event, including transportation.

Furthermore, I hereby assume all risk of said personal injury, sickness, death, damage and expense as a result of participation in Centreville United Methodist Church activities.

Further, authorization and permission are hereby given to said organization to furnish any necessary transportation, food, and lodging and to assign work to this participant.

I further hereby agree to hold harmless and indemnify Centreville United Methodist Church, its directors, officers, employees and agents, for any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred.

I am the parent or legal guardian of this participant, and hereby grant my permission for him/her to participate fully in the events where a registration form has been completed, and hereby give my permission to take my child to a doctor or

Parent Signature (if participant has not attained 21 years) _____ Date _____ Phone Number _____

Your child's photo may be used for Centreville UMC media purposes. No child's name will be used in connection with any photos. If this is a concern, please email kstuebing@centreville-umc.org. Please acknowledge you have read. Initial

Parental Consent and Liability Release Form

PARTICIPANT'S NAME _____ AGE _____ BIRTH DATE _____
ADDRESS _____
PHONE _____ SCHOOL _____ GRADE _____
PARENT(S)/GUARDIAN NAME(S) _____
WORK PHONE(S)/ CELL PHONE(S) _____ / _____

TO WHOM IT MAY CONCERN:

The undersigned do(es) hereby give permission for our (my) child(ren):

_____ ("Participant"), to attend and participate in **YOUTH MINISTRY EVENTS** sponsored by the **Virginia Conference of the United Methodist Church**. We understand that if our child must cancel his/her reservation to attend within the two week period before an event, we will still be financially responsible for this reservations unless there is an unforeseen circumstance such as serious illness or death in the family.

LIABILITY RELEASE: In consideration of **The Virginia Conference** allowing the Participant to participate in children or youth ministry activities, we (I), the undersigned, do hereby release, forever discharge and agree to hold harmless **The Virginia Conference**, its directors, employees, volunteers and agents (collectively herein the "Church") from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the Participant while involved in the children/youth activities. We (I) the parent(s) or legal guardian(s) of this Participant hereby grant our (my) permission for the Participant to participate fully in youth ministry activities, including trips away from the church premises.

Furthermore, we (I) [and on behalf of our (my) minor Participant(s)] hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein.

Further, authorization and permission is hereby given to said Church to furnish any necessary transportation (within the limitations of church insurance and the law), food and lodging for this Participant. The undersigned further hereby agree to hold harmless and indemnify said Church for any liability sustained by said Church as the result of the negligent, willful or intentional acts of said Participant, including expenses incurred attendant thereto.

MEDICAL TREATMENT PERMISSION: We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child or youth pursuant to this authorization.

EARLY RETURN HOME POLICY: Should it be necessary for our (my) child or youth to return home due to medical reasons, disciplinary action or otherwise, the undersigned shall assume all transportation costs and responsibility.

TRANSPORTATION PERMISSION: The undersigned does also hereby give permission for our (my) youth to ride in any vehicle driven by an approved ADULT chaperone while attending and participating in activities sponsored by **The Virginia Conference**. My child/youth and I understand that SEAT BELTS SHALL BE WORN AT ALL TIMES during transportation.

Medical Insurance: YES _____ NO _____ Insurance Company: _____

Policy/Group ID#: _____ Emergency Phone #s in case parent/guardian cannot be reached: _____

Allergies or Medical Conditions: _____

Parent/Guardian Signatures _____ / _____ Date _____

Youth Covenant of Conduct

During the meetings and events under the sponsorship and guidance of the Virginia Conference, I recognize that I am a representative of the Christian Community and I am responsible for my actions. I understand that by signing this Covenant, I agree to abide by the following guidelines:

I Shall:

- ☺ Recognize that everyone in the group is a part of the body of Christ. I will embrace inclusiveness by making sure that everyone feels welcome and important.
- ☺ Respect the physical and emotional well-being of others by "doing unto them as I would have them do unto me." (This includes refraining from harsh play or violence, refraining from harmful jokes, respecting the need for sleep, etc.)
- ☺ Respect the health of my own body by refraining from the use of tobacco, alcohol, and illegal drugs. I understand that the use of these substances is absolutely prohibited.
- ☺ Respect the things I use and the property of places I visit. The areas used for all events, including transportation, shall be left clean.
- ☺ Participate fully in ALL scheduled group activities and abide by additional group guidelines made during Annual Conference.
- ☺ Act appropriately with members of the opposite sex. This means no couples alone at any time, and no public displays of affection.
- ☺ Follow all instructions given by group leaders and chaperones without protest. (This does not mean an instruction may not be politely and discretely questioned if it seems unreasonable).
- ☺ Stay within the group or assigned sub-group at all times. I will not wander off alone or leave the activity site unless granted permission by an adult, and I will report for all designated check-in times.
- ☺ Hold safety in the highest regard and refrain from compromising my own safety or another's safety.
- ☺ Provide a trusting environment for my peers. When others share something about themselves in a group discussion, I will not repeat that information to other friends outside of the group.

Guidelines for Consequences:

Consequences will focus on restoring peace with reconciliation among the parties involved. The goal of resolving each problem will be growth and learning through repentance and forgiveness. Any problems encountered will be handled within the group and by the adult leaders to the extent that this is possible. However, should a situation persist or become uncontrollable, the parent/guardian will be contacted and informed of the problem. Should the situation be urgent, the parent/guardian will be contacted immediately and will be responsible for picking up the youth from an event or providing for his/her transportation home.

Child/Youth and Parent/Guardian Signature:

In signing this covenant, I vow that I have read and understand these guidelines. I recognize that a covenant is a binding promise, and my signature is testimony that I agree to adhere to the provisions of this covenant.

Signature of Child/Youth _____ Date _____

Signature of Parent/Guardian _____ Date _____