

PERMISSION & AUTHORIZATIONS - *Signatures Required*

Hoyleton Buddies Mission Experience: June 30 – July 3, 2018

DuBois Center - Illinois South Conference United Church of Christ

Name of Youth or Adult Attendee				Age (if under 21)
	Last	First	MI	

PERMISSION FOR PARTICIPATION IN EVENT & EVENT ACTIVITIES:

The individual named above has my permission to attend the Hoyleton Buddies Mission Experience.

The individual named above has my permission to participate in transportation to, from and during this event provided or arranged by the attendee's church, event coordinators or Illinois South Conference staff members.

I/We (attendee and parent, if attendee is a youth participant) understand and support policies prohibiting the use or possession of weapons, tobacco products, alcoholic beverages and illegal drugs or controlled substances. We recognize that all attendees must follow safety guidelines and refrain from harmful behavior. I/We understand that if an attendee is unable to live within these guidelines and those outlined in the Covenant, he/she may be sent home without a refund of the program fee.

There are challenges inherent with participation in any event activity, including but not limited to archery, boating, challenge course, games, hiking, horseback riding, swimming, wagon rides and work projects. I understand that these challenges, which contribute to the unique character and desirability of the activities, pose the possibility of severe injury, illness or death. I further understand that many event activities may take place in an outdoor environment. For this and other reasons, I understand the challenges often cannot be eliminated, altered, or controlled. I give permission for myself and/or my child to participate in all event activities, including but not limited to those described above. I acknowledge and assume the risks involved in these activities, and for any damage, illness, injury, or death resulting from such risks, for myself or my child. There are no physical, emotional or mental problems or limitations associated with my child's or my participation in event activities, except as disclosed by me in writing to the Illinois South Conference. I have read and understand the above and agree to the terms of this waiver.

Signature of Adult Attendee
or Custodial Parent / Guardian

Date

PERMISSION FOR FIRST AID, EMERGENCY TREATMENT AND TRANSPORTATION:

To the best of my knowledge, the information on the Registration-Health Information form is correct and accurately reflects the current health status of the attendee named above. I hereby give permission to the advisor from the attendee's church, DuBois Center and Illinois South Conference staff members to provide, seek and consent to first aid, routine health care, administration of prescribed medications, emergency treatment and transportation for me or my child, as may be deemed necessary. I also give permission to medical personnel, authorized by the advisor from the attendee's church, DuBois Center and Illinois South Conference staff members, to order x-rays, routine tests and proper treatment related to the health of the attendee for both routine care and, in emergency situations, to hospitalize and order injections, anesthesia or surgery for me or my child. I understand the information on this form will be shared on a "need to know" basis. I give permission to photocopy this form. It is my intention that the advisor from the attendee's church be treated as acting *in loco parentis* if the person named herein is a minor. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes.

Attach a copy of your insurance card.

Signature of Adult Attendee
or Custodial Parent / Guardian

Date

PHOTO RELEASE:

DuBois Center and the Illinois South Conference utilize a variety of media, such as brochures, newsletters, media productions such as PowerPoint presentations, videos, Facebook and our websites, to interpret and promote our ministry and programs. Recognizing the value of these interpretive materials, I hereby grant DuBois Center and the Illinois South Conference of the United Church of Christ and their designated agents, permission to use images of myself or my child for interpretive or promotional efforts.

Signature of Adult Attendee
or Custodial Parent / Guardian

Date