

St. Paul's Episcopal Church Youth Ministry Registration/Release Form
Adapted from the Episcopal Diocese of Oregon Youth Ministry Registration/Release Form

M&M Camp 2019

July 7th-July 9th
Eugene, Oregon

Name of Participant: _____

Address: _____

Phone (Home & Cell): _____

Email Address: _____

Age: _____ Date of Birth: _____

School: _____ Grade: _____

T-shirt size: _____

Name of Parent(s) or Guardian: _____

Parent/Guardian Cell Phone(s): _____

Parent/Guardian Email: _____

- o Medical Release: As the parent or legal guardian of the minor named above, I understand that, in the event that emergency medical intervention is required for my child, every attempt will be made to contact me or the alternate contact provided. In the event that I or the alternate contact cannot be reached in an emergency during the course of this event, I hereby give permission to the physician selected by the event leaders to secure medical treatment and/or to order an injection, anesthesia, or surgery for my child as deemed necessary.
- o Liability Waiver: I understand that all reasonable safety precautions will be taken at all times by the Diocese of Oregon and its agents during this event. I understand the possibility of unforeseen hazards and know of the inherent possibility of risk. I agree not to hold the Diocese of Oregon, its leaders, employees, or volunteer staff liable for damages, losses, diseases, or injuries incurred by my minor child, as named herein. I have carefully considered the risk involved and given my child permission to attend this event.
- o Photo Release: I consent to the use, by the Diocese of Oregon, of any photographs or visual or audio recording in which my minor child may appear. I understand that these materials may be used for promotion of this event or of the youth ministry of the Diocese of Oregon, including recruitment and fundraising efforts. I understand that pictures and/or recordings of my minor child will not be given or sold to any third party.

Name of parent/guardian

Signature of parent/guardian

Date

St. Paul's Episcopal Church Youth Ministry Medical Information Form

M&M Camp 2019

July 7th-July 9th
Eugene, Oregon

Name of Participant: _____

Address: _____

Phone (Home & Cell): _____

Email Address: _____

Age: _____ Date of Birth: _____

My child has the following medical conditions, allergies, food restrictions, learning challenges: _____

My child takes the following prescriptions or over-the-counter medications: _____

My child is NOT to take the following medications (i.e. Tylenol, Ibuprofen, etc.): _____

Medical Insurance Carrier: _____

Name of Primary Insured: _____

Policy & ID Numbers: _____

In the event I cannot be reached in an emergency, please contact:

Name/Relationship: _____

Phone: _____

Name of parent/guardian: _____

Signature of parent/guardian and Date: _____

St. Paul's Episcopal Church (Episcopal Diocese of Oregon)

M&M Camp 2019

Community Covenant for Participants and Parents

Participant Covenant

- I will be an active participant at this St. Paul's Youth event and will respect the dignity of the other participants and all human beings!
- I understand that bullying of any type or degree will not be tolerated. Participants participating in bullying will be sent home immediately.
- I will stay with the group at all times and respect the property of St. Paul's Episcopal Church and Church of the Resurrection, Eugene, as well as anywhere we go off-site.
- I know that the possession and/or use of any tobacco product, alcohol, illegal drugs and/ or any medication not prescribed to me as well as any fireworks, firearms or any other type of weapon will result in me being sent home immediately.
- I understand that engagement in sexual activities is contrary to the focus and norms of the weekend and our collective time together.
- I know that there is a "rule of 3" norm about how many people (adults/ youth) are together and agree to enforce it while I am at the event.
- I will respect the property of others as if it were my own: I will not steal, borrow, or use anything that does not belong to me. I know that if I am in possession of any property that does not belong to me, I will be sent home immediately.

I make this covenant with my brothers and sisters in Christ and. I agree to abide by the above guidelines and consequences.

Participant Signature: _____ **Date:** _____

Participant Name: _____

PARENTAL COVENANT SUPPORT

- I, as parent or legal guardian of the above youth, give permission for him/her to attend the M&MCamp2019. I have read the above Community Covenant and understand that I will be contacted to arrange their transportation home if my son/daughter violates this Covenant.
- In the event of accident or illness, I grant Amy Goerger, Youth Leader at St. Paul's Episcopal Church, or an adult leader designated by her, permission to obtain appropriate medical care for my child. I will be responsible for any expenses incurred in the process of obtaining that care.

I agree to support the above covenant and consequences.

PHOTOGRAPHY PERMISSION:

In the course of diocesan youth events, pictures may be taken by diocesan staff or committee members. The Episcopal Diocese of Oregon/St. Paul's Episcopal Church has the right and permission to publish copyright and use pictures of those attending diocesan events. If you are unwilling for your son/daughter's photo or voice to be used for promotion of diocesan events, please let Amy Goerger know prior to the event.

Parent Signature: _____ **Date:** _____

Parent Name: _____

SPY M&M Camp 2019

Communication and Food Survey

(Updated 6-4-19)

Name _____

Cell Phone _____

Home Phone _____

Email _____

Do you text _____Yes _____No

Do you email _____Yes _____No

Facebook _____Yes _____No

Username _____

Instagram _____Yes _____No

Username _____

Food Allergies _____

____Vegetarian ____Vegan ____Gluten Free ____Dairy Free ____other _____

For breakfast I like to eat _____

For breakfast I like to drink _____

My favorite sandwich is _____

My favorite dinner main dish is _____

My favorite dinner side dish is _____

For dinner I usually drink _____

My favorite snack food is _____

I am a ____ morning person ____night person ____ both

I need _____ hours of sleep each night.

I am an ____extrovert ____introvert ____not sure

One thing I am hoping to gain on this trip is
