VCSTUDENT 2011-2012

VCSTUDENT PARTICIPATION FORM
Release/Permission for All 2011-12 Activities

Valley Creek Church PO BOX 251066 Woodbury, MN 55125 651.739.9444 valleycreekchurch.com

PARTICIPANT INFORMATION

NAME:_____MALE/FEMALE_____BIRTHDATE___/___/___GRADE_____

MAILING ADDRESS:_____CITY_____STATE___ZIP_____

PARENT(S)/GUARDIAN(S):_____HOME PHONE:_____

PARENT(S)/GUARDIAN(S) EMAIL:_____

CHECK ALL THAT APPLY:

❏ 2011-12 Wednesday Nights ❏ Fall Retreat Sept 16-18, 2011 ❏ Convention Oct 20-22, 2011
❏ Winter Retreat Feb 17-19, 2012 ❏ Camp July 9-13 & July 23-27, 2012 ❏ Valleyfair Aug 9, 2012

(Note: Additional Forms will be required for Camp and Missions trip. Checking multiple boxes is not required and does not mean you are committing your student to each future event. It allows us to keep the form on file so you don't have to fill out a new form for every event. This form can be accessed online if you prefer a new form for each event.)

MEDICAL INFORMATION

Insurance Coverage? ❏ Yes ❏ No Date of last Tetanus Booster:_____

Health Problems/Limitations:_____

Allergies to Drugs or Foods:_____

My child can be given pain reducing medication (Tylenol, Aspirin, Excedrin, etc) as deemed necessary ❏ Yes ❏ No

If NO, please list medication not to be dispensed:_____

RULES: Students are under the authority of Valley Creek Church staff and adult volunteers. No stealing, illegal drugs, weapons, tobacco, fighting or alcohol. On overnight events, no members of the opposite sex are allowed in a room or tent together without supervision. No pranks. No wandering off alone. No cell phones during Camp, Missions trip, or any Wednesday night or Convention service. Students who damage property are responsible to pay for repair/replacement. Parents may be asked to drive and pick up student if rules are violated.

MEDICAL & LIABILITY RELEASE: I understand the nature of the Valley Creek Church activities in which my son/daughter will be participating and that he/she is expected to abide by all church rules during the course of the activities. I, acting on my own behalf, also release Valley Creek Church, its church staff and volunteer leaders from any liability whatsoever arising out of disregard of rules, property damage or loss as well as any injury, sickness or death which may be sustained by my child as the result of participation in any Valley Creek Church activity. I hereby give my permission for him/her to participate in all the above-checked Valley Creek Church activities planned from September 7, 2011 to August 29, 2012.

I authorize Valley Creek Church to use our child's likeness in photographs or video in any and all of its publications, website, and other media. I will make no monetary or other claims against the church for the use of such photos or videos. I understand that if my child misbehaves and violates the Valley Creek Church rules, I may be called to pick him/her up from any activity.

I give my permission for the local physician to treat the listed student in the event of a minor illness or minor injury. In case of emergency, and when I am unable to be contacted, I hereby give permission to the local physician selected by the Valley Creek Church staff or volunteers to hospitalize, secure proper treatment for, order injection, anesthesia, or surgery for my child.

SIGNATURE OF PARENT/GUARDIAN: _____DATE:_____

PRINTED NAME:_____CELL PHONE:_____