

MY HIGH SCHOOL CHILD WILL BE ATTENDING:

Planet Wisdom ___ Colorado Ski Trip ___ Winter Camp ___ Dare2share ___

I am willing to help drive and chaperone for the event. Yes ___ No ___

CODE OF CONDUCT

STUDENTS WILL NEED TO BE ON THEIR BEST BEHAVIOR, PARENTS WILL BE NOTIFIED IF THERE IS A PROBLEM.

CELL PHONES: THERE WILL BE LIMITED TIMES DURING THE DAY THAT CELL PHONES WILL BE ALLOWED. .

NO PURPLE-ING ALLOWED: Meaning Boys are BLUE, girls are RED and any physical contact (yes, even holding hands) which might compromise the integrity of these colors is considered "purple-ing." Be respectful of others, be respectful of yourselves. Let's spend these days and nights especially being respectful of the fact that we are gathered in HIS name and do things that GLORIFY God.

COME WITH A SPIRIT OF RESPECT, FUN, ENCOURAGEMENT AND COOPERATION. WE ARE HERE TO LIFT EACH OTHER UP!! MAY OUR WORDS AND DEEDS BRING GLORY TO GOD!!!!

STUDENTS Name _____ Sex M F

Date of Birth _____ Age _____ Grade in August 2006 _____

School _____

Address _____ City _____ Zip _____

Family Doctor _____ Doctor's Phone _____

Preferred Hospital _____

Hospitalization Insurance Company _____

Policy Number _____

Allergies/Medical Conditions _____

Mothers Name _____ Fathers Name _____

Mothers Phone _____ Fathers Phone _____

Mothers Email _____ Fathers Email _____

Please list the name of the nearest relative/neighbor to be contacted in case of an emergency:

Name _____ Relation _____ Phone _____

RELEASE AND HOLD HARMLESS AGREEMENT FOR FIRST UNITED METHODIST CHURCH

By my signature, I _____, the parent or guardian of _____

Grant my permission for him/her to participate fully in any activities or trips sponsored by First United Methodist Church. I understand that my signature carries with it the following:

- An authorization of any of the adult leaders to obtain necessary medical attention and/or treatment for my son/daughter.
- The release of medical information necessary to provide treatment.
- I knowingly release, absolve, indemnify and hold harmless First United Methodist Church from all claims that might result from an injury or death of a minor. This agreement pertains to all programs and activities including those where transportation is provided.
- Should medical help be needed, I agree to pay, directly or through my own personal health and accident insurance policy, all medical or hospital costs.

Signature _____ Date _____

(REVISED 10/2008)