

# TYNER UNITED METHODIST CHURCH

## STUDENT MINISTRIES EVENT REGISTRATION & COVENANT

I, the parent/guardian, permit \_\_\_\_\_ to attend \_\_\_\_\_  
With Tyner United Methodist Church Student Ministry on the date(s) of \_\_\_\_\_.

I have completed an up-to-date (within a year) Medical Release/Insurance Form for my child which is on file at Tyner United Methodist Church: Yes No (Please circle one).

As parents or legal guardians of the above youth, I/we hereby authorize any medical and/or surgical care, including diagnosis and treatment rendered to him/her by any licensed hospital, when accompanied by an adult leader of Tyner United Methodist Church. I/We (the parent/guardian) assume full financial responsibility for such care, including prescribed medications and transportation by ambulance and agree to make full payment for same upon receipt of statement of fees.

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date completed

In order to create a positive and healthy atmosphere, we expect that each person (student, counselor, and staff) to live within the framework of our Student Ministry Covenant.

**As a gathered community in Christ, we agree to:**

- Share God's love by always speaking in a positive and encouraging manner.
- Become visible reflections of Christ in our relations with one another and all whom we come into contact with during our time together.
- Respond to God by participating in and promptly being on time for all scheduled group programming.
- Value God's people by respecting the authorities God provides for us (local & state officials, Tyner UMC staff, adult leaders, young adult leaders, interns, or any other event staff).
- Exercise humility and self-control by being modest in our choices of clothing and appropriate in our relations with others.
- Exemplify Christ as we honor all rules, regulations, and safety guidelines of any hired charter companies or accommodations.

**Other Guidelines** (while participating in Trips, Retreats, and Special Events):

- Male/Female Rooms: Whenever participating in overnight events which include designated rooms for males and females, no person (including adult leaders, interns, and staff) may enter a room of the opposite sex.
- Traveling Trios: Whenever participating in an offsite event where multiple activity options are offered, all participants need to be in groups of three or more, and have the approval of an adult.
- Offsite Travel: If, for any reason, a participant needs to travel offsite during a regularly scheduled event, permission must be received from the church staff and there must be at least one adult traveling with them.
- Nighttime Travel: While traveling with Tyner Student Ministries on a bus or airplane, all participants (including adult leaders, interns, and staff) need to be seated next to a person of the same gender after dark.
- Tobacco and Alcohol: Out of respect for those younger, it is requested that anyone of legal age refrain from tobacco and/or drinking alcohol while on the event (it is understood that those under legal age are restricted from tobacco and alcohol consumption by state law).
- Firearms and Weapons: No firearms or weapons of any kind are permitted on Tyner Student Ministry trips, retreats, or events.

I/we understand that not acting in accordance with this covenant may result in disciplinary actions of the director's discretion, up to expulsion from the event, suspension from a given number of future Tyner Student Ministries events, and the assumption of all transportation, legal, and financial liability. By my signature on this form, I am indicating that I have read this covenant and accept my end of the agreement.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**MEDICAL RELEASE FORM**  
**TYNER UNITED METHODIST CHURCH**

(To be filled in by parent(s)/guardian(s) of minors)

Student's Name: \_\_\_\_\_

Birthdate \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

**Parent or Guardian or Spouse:** \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Home Address \_\_\_\_\_

Street

City/State

Zip

Business Address \_\_\_\_\_

Street

City/State

Zip

**Second Parent/Guardian or Emergency Contact:** \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Home Address \_\_\_\_\_

Street

City/State

Zip

Business Address \_\_\_\_\_

Street

City/State

Zip

**HEALTH HISTORY** (Check - Giving Approximate Dates)

\_\_\_ Frequent Ear Infections

\_\_\_ Allergies

\_\_\_ Diseases

\_\_\_ Heart Defect/Disease

\_\_\_ Hay Fever

\_\_\_ Chicken Pox

\_\_\_ Convulsions

\_\_\_ Ivy Poisonings, etc.

\_\_\_ Measles

\_\_\_ Diabetes

\_\_\_ Insect Stings

\_\_\_ German Measles

\_\_\_ Bleeding/Clotting Disorder

\_\_\_ Penicillin

\_\_\_ Mumps

\_\_\_ Hypertension

\_\_\_ Other Drugs

\_\_\_ Mononucleosis

\_\_\_ Asthma

Other diseases or details of above: \_\_\_\_\_

Surgeries or serious injuries (Dates): \_\_\_\_\_

Disability or chronic or recurring illness: \_\_\_\_\_

Any specific activities to be encouraged or limited by physician's advice: \_\_\_\_\_

Dietary modifications: \_\_\_\_\_

Current medications (send with instructions): \_\_\_\_\_

**Name of Family Physician:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Date of last physical examination: \_\_\_\_\_

**Name of Dentist/Orthodontists:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

## INSURANCE INFORMATION

(It is important this be complete in case of an emergency).

**HEALTH INSURANCE COMPANY** \_\_\_\_\_

**POLICY NUMBER** \_\_\_\_\_

**DATE OF LAST TETANUS SHOT** \_\_\_\_\_

If any changes in the health of my child occur after the completion of this form, I understand I need to inform, in writing, the Director of Student Ministries.

## AUTHORIZATION TO CONSENT TO TREATMENT OF MINOR

We, the undersigned parent(s)/guardian(s) of \_\_\_\_\_, a minor, do hereby authorize adult workers with youth of Tyner United Methodist Church, as agent(s) for the undersigned, to consent to any examination, x-ray, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is rendered under the general or special supervision of any physician or surgeon licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such a diagnosis or treatment is rendered at the office of said physician or at said hospital.

\_\_\_\_\_  
Parent(s) or Guardian(s) Signature Date Completed

I (we) the undersigned parent(s) or guardian(s) of \_\_\_\_\_ (a minor) give our consent for him/her to participate in the Student Ministries Program of Tyner United Methodist Church. This consent extends to participation in activities held on the church premises as well as those held in other locations. In case of accident or illness I will not hold the church, its paid staff or approved volunteers liable. I (we) understand that in the event our child would like to bring a guest to activities beyond the church premises, then permission from the guest's parents is needed. Their permission should include permission for the activity and two emergency contacts.

\_\_\_\_\_  
Parent(s) or Guardian(s) Signature Date Completed

### STATE OF TENNESSEE/COUNTY OF HAMILTON

\_\_\_\_\_ appeared before me, a Notary Public of the State and County aforesaid. WITNESS my hand and seat this \_\_\_\_\_ Day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

# TRANSPORTATION RELEASE

I, \_\_\_\_\_, the parent and/or legal guardian of \_\_\_\_\_ (“Child”) wish to allow Child to travel (by car, van, bus, or similar mode of transportation) on one or more trips (“Trip(s)”) organized by Tyner United Methodist Church Student Ministries (“Tyner Students”) with Trip(s) will take place during the 2019-2020 school year or 2020 calendar year. In recognition that whatever fees I may pay to Tyner United Methodist Church (“Church”) or to Tyner Students in connection with the Trip(s) do not cover Child’s share of all costs, expenses, and potential liabilities incurred by or which may be incurred by the Church or Tyner Students in connection with the Trip(s), and in consideration for Child’s being allowed to participate in the Trip(s), I agree to: (1) accept and assume all risks, known and unknown, in connection with the Trip(s); (2) assume all responsibilities for all losses, costs, or damages that may result from any injury to Child or to Child’s property during or in connection with the Trip(s); (3) release and discharge Tyner Students, the Church, and its pastoral staff, officers, members, employees, agents, affiliates, volunteers, drivers, teachers, and administrators (collectively “Releasees”) from any claims, demands, causes of action, cost obligations, losses, or financial responsibility for or relating to any bodily or personal injury, disease, property damage, incident, or accident occurring during or in connection with the Trip(s); (4) defend Releasees from any claim, including without limitation, lawsuits, judgments, and any appeals thereof in connection with the Trip(s), and (5) indemnify and hold harmless Releasees from any such responsibility and liability, including the payment of damages, costs, and expenses or attorney’s fees that are ordered to be paid, and also including, without limitation, Releasees’ own costs, damages, and attorney’s fees. I understand that by signing this RELEASE, I give up substantial rights that I and/or Child otherwise would have or may have to recover damages for losses, including those occasioned by the negligence of the Releasees or any of them, and those occasioned by any other cause. I confirm that I am at least 18 years of age and that I am legally competent to sign this document on my behalf and on behalf of Child.

I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY, ASSUMPTION OF RISK, DEFENSE, AND INDEMNITY AGREEMENT. I UNDERSTAND ITS CONTENTS AND I SIGN IT AS MY OWN FREE ACT.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

# PHOTO, VIDEO, AND SOCIAL MEDIA RELEASE

I, the parent/guardian, \_\_\_\_\_ (please print), grant permission to Tyner United Methodist Church and its agents and employees the irrevocable and unrestricted right to reproduce the photographs and/or video images taken of me, or members of my family (my students, listed here: \_\_\_\_\_), for the purpose of publication, promotion, illustration, advertising, or trade, in any manner or in any medium. I hereby release Tyner United Methodist Church and its legal representatives for all claims and liability relating to said images or video. Furthermore, I grant permission to use my statements that were given, with or without my name, for the purpose of advertising and publicity without restriction. I waive my right to any compensation.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date