



Dear Parents and Guardians,

We are so glad you've decided to be part of our ministry. This Guardian Consent Packet is filled with information for you to fill out. This information will help us ensure the safety of your student. The packet must be completed and returned to The Branch Staff before your student can participate in any major activity or event. Enclosed you will find a medical release form, and general rules and guidelines for you to look over and sign. These forms are good for the duration of your child's participation in Youth Group. However, families must fill out one packet for each student!

We are doing this to ensure a safe environment for your teen. We want your child to get the most out of the trips we will take.

We appreciate you're cooperation and understanding. We look forward to having a fun year with your Child!

Sincerely,

The Branch Staff

In case of an Emergency for your information:

Eric Jones: 240.300.4847

Mike Johnson: 301.399.9321

General Rules and Guidelines

We strive to be as amiable as possible however there are certain things that can NOT be tolerated. We have to be concerned with the safety and well-being of the entire youth body. We believe that the body of Christ is us, the church and we have to think of the entire body when it comes to certain activities and behaviors. By signing this form you have agreed to our terms and conditions. If you do not sign this form then we cannot allow your child to participate in any activity or event.

The following actions WILL cause immediate ejection from the activity or event. This means that the participant will be sent home at their parents or guardians expense. In most cases, the parent or guardian will be required to come and get their child. However, if it is deemed necessary, we will send your child home via public transportation (e.g. bus, plane, or train) or by one of the other counselors. This too will be at your expense.

- Any kind of sexual promiscuity
- Possession and/or use of alcohol or illegal drugs
- Possession or use of fireworks or ANY kind of weapon.

The following actions CAN cause immediate ejection from the activity or event. Participants could be asked to come home at their parent's or guardian's expense at the sole discretion of the youth pastor and/or other volunteers. If necessary we will send your child home via public transportation (e.g. bus, plane or train). This too will be at your expense.

- Fighting or any other type of physical altercation.
- Insubordination. Your child MUST listen and obey the direction of leaders and the rules of the establishment where the activity or event is being held.

We hope that we do not have to make use of these rules. Our aim is to minister to your children. While ministry is our key goal, fun is also a goal, however some fun can get carried away, as well as some youth having fun. These actions can result in damage to property or breakage, and it has been determined that your child was a participant; you will be responsible for any expenses incurred.

(Parent or Guardian Signature)

(Participant's Signature is also required)

Please Print

Please Print

Permission for Photography

Over the course of the year, we may take pictures of your teen at various events. By signing on this line, you agree to allow us to post your teen's photo on social media sites, or for marketing purposes. PLEASE NOTE: You do not have to sign this if you're not comfortable with us posting pictures online of your child.

I understand that as a participant my child may be photographed for promotion of this ministry and I give my consent for these photos to be displayed or printed.

(Parent/Guardian Signature)

I, the undersigned, do hereby verify that all the information in this packet is correct and do hereby release and forever discharge all employees, sponsors and volunteers affiliated with Grace Brethren Church, including Eric Jones, The Branch Staff, and/or the sponsors, volunteers, and members of the event promoted from any claims, demands, actions or cause of action past, present or future arising from any damage or injury of my child while participating in the activities or events. I agree that I take full responsibility for the total amount of this event on behalf of my child, even if they have to cancel their participation or are ejected from the event.

(Parent or Legal Guardian)

Childs Name (Please Print)

Student's Name: _____

Student's Name: _____ Age: _____ DOB: _____

Child's Cell #: _____ Address: _____

City/State/Zip: _____

Emergency Contact: _____ Relationship: _____

Home# _____ Cell Phone# _____

Family Doctor: _____

Insurance Policy: _____ Grp# _____ Member ID _____

Current Medications: _____

Past Medical History

(Check the appropriate information which applies to your child.)

Asthma Sinusitis Hay Fever Kidney Trouble Bronchitis Diabetes Dizziness
Upset Stomach Heart Trouble

Please list any other medical concerns below.

Please list any allergies your child has, or could potentially have and the severity of them.

Child Hood Diseases

Mumps Measles Whooping Cough Chicken Pox

Others (Explain) _____

***My permission is granted to Eric Jones and the other volunteers to obtain; if necessary, medical attention in case of sickness or injury to my child.

Parent's Signature/ Date _____