

# Participation Information 2011-2012

Last Name \_\_\_\_\_

First United Methodist Church Youth Department ♦ 1826 Nall Street ♦ Port Neches, TX 77651 ♦ (409) 722-8357

Minor's Full Name	Complete Date of Birth	Minor's Home Telephone Number (409)
Minor's Street Address	City	Zip

List telephone numbers where Parents/Guardian may be reached while Minor is in care:	Mother's Telephone No.	Father's Telephone No.
	Place of Employment/Occupation	Place of Employment/Occupation

Person to call in case of emergency and parent/guardian can't be reached:	Telephone No.
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Does your minor have any special needs such as allergies to food, insect bites, or anything else, existing illnesses, prior serious medical conditions, take any medications, or other characteristics which staff should know to serve your minor better?  No  Yes If Yes, please list all information:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:**

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the facility director or person in charge to take my Minor to:

Name of Physician	Address	Phone
Name of Hospital	Address	Phone
Insurance Company	Insurance Verification Telephone No.	Policy/ID #

**PLEASE READ, CHECK, AND SIGN:**

**PHOTO RELEASE:** I hereby  give  do not give my consent for my Minor to be photographed during a church activity for possible publication.

**CONSENT FOR MINOR TO TRAVEL AND TREATMENT PERMISSION:**

First United Methodist Church, 1826 Nall Street, Port Neches, Texas 77651, (409) 722-8357, and its Minister, Youth Director, or other appointed chaperone has permission for the minor listed to attend and participate in the planned activities and events which are part of the program ministries of First United Methodist Church. The minor is to comply with all behavior expectations governing church programs.

Chaperones may select any hospital or doctor which can render such services as may be needed by the minor. Discretion of said chaperones shall be fully binding on parent or guardian whose signature appears below. This signature also releases First United Methodist Church from liability and waives any and all claims against church authorities, counselors, or leaders, either singly or collectively for any injury which might be received during the trip, at destination, or in traveling to or from said destination. This agreement applies to use of the church van and/or individual vehicles.

Parent or guardian whose signature is below has responsibility for insurance for this minor and understands that the church does not carry insurance for activities.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

State of Texas  
County of Jefferson

Before me, \_\_\_\_\_, personally appeared \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public