



Of Leonardtown Baptist Church

2020 Activity Permission Form

Youth Name: _____

Activity Name: _____

Dates: _____

Contact Information (During the Activity)

Phone Number: _____ Other Contact: _____

Activity Guidelines

In order to help ensure each person's safety and enjoyment of the activity we have created a brief list of guidelines. Please review the guidelines below and make sure the youth attending the activity is prepared to abide by them.

- Each person will wear a seat belt while traveling in motor vehicles.
- Public Displays of Affection should be kept to a minimum. Final determination on conduct will be at the discretion of the adult leaders.
- Each person will abide by the house rules of our location and follow the instructions of the staff.
- The following are not permitted: use of foul language; the possession or use of tobacco products, alcohol, and/or illegal drugs; no weapons (guns, knives, etc.); no personal electronic equipment (CD/MP3 Players, Video Game Units, etc.) is permitted.
- Cell phones may be brought on the trip. They may only be used during free time or with an adult's permission.
- Each youth participating in the trip may be placed in a group with one or more adults. Each youth must stay with [and/or in contact with] the adult(s) they are assigned throughout the activity.
- Each youth will assist with cleaning the vehicles and equipment used on the activity upon return to LBC and prior leaving to go home.
- No youth will be released from the group except in an emergency situation as determined by the Associate Pastor or the leader in charge. If this is necessary, the youth will only be released directly to their parent or guardian unless circumstances require another arrangement that is requested by the parent or guardian.
- Each youth will be present and on time to any meeting times and places as announced.
- Each youth will be respectful of others and follow the instructions of any adult leader.
- Each person is expected to dress appropriately. We ask each person to apply a high standard of modesty to their dress. Only one-piece (or "tankini" swimsuits worn as a one-piece) swimsuits will be permitted for girls. Guys must wear swimming trunks – no other type of swimsuit will be allowed. No underwear should be visible.
- Each person is reminded that they are representing Jesus Christ and Leonardtown Baptist Church while on this activity. Our behavior should reflect well on both the church and its Lord.

Discipline Policy

The following steps will be taken by the adult leaders in the event any discipline action is necessary:

- 1) Early Warning – The youth will receive an early warning and he/she will be asked to comply with the guidelines established for the activity.
- 2) Strong Warning – The youth will receive a strong warning and he/she may be placed in the care an adult leader for a set period of time.
- 3) Final Warning – The youth will receive a final warning that will result in a phone call to that youth's parents or guardians who may be asked to come and pick up the student from the activity.

Signatures

I, the undersigned Parent/Guardian, grant permission for my child / children (designated "Youth" below) to attend this activity. I understand that youth leaders and staff from the church will be transporting my child during the event in rental vans or their personal vehicles. I also understand that as a participant, my child / children will be photographed or recorded on video and these images/videos may be used in promotional materials such as the church internet site, posters, brochures, etc.

I understand these guidelines and I am willing to abide by them. I understand and agree that if the youth signed below does not abide by these guidelines and the instructions of the Youth Leaders the Discipline Policy above will be enforced.

Youth: _____

Parent/Guardian: _____



Of Leonardtown Baptist Church

2020 Health Form [CONFIDENTIAL]

Name: _____

Page 1 of 2
PLEASE PRINT

STUDENT INFORMATION

Date of Birth _____ Age _____ Sex _____
Address _____ City _____ State ____ Zip _____
Home Phone Number _____ Mobile Phone Number _____

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name(s) _____
[If Different] Address _____ City _____ State ____ Zip _____
Home Phone Number _____ Mobile Phone Number _____

EMERGENCY CONTACT (other than parent/guardian)

Name(s) _____ Home Phone _____ Mobile Phone _____

MEDICAL RELEASE STATEMENT

I understand that in the event medical intervention is needed, every attempt will be made to contact immediately the persons listed on this form. In the event I cannot be reached in an emergency during the activity, I hereby give my permission to the physician or dentist selected by the activity leader to hospitalize, to secure medical treatment and/or to order an injection, anesthesia, or surgery for my child as deemed necessary.

I understand that my insurance coverage for my child will be used as primary coverage in the event medical intervention is needed.

I understand all reasonable safety precautions will be taken at all times by the Youth Ministry Team of Leonardtown Baptist Church and its agents during the events and activities. I understand the possibility of unforeseen hazards and know the inherent possibility of risk.

I agree not to hold Leonardtown Baptist Church, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the subject of this form.

I also give my authorization to give my child over-the-counter pain relief medication as needed and requested by him or her. My child may take the following type of pain relief medication: _____

Parent/Guardian Signature _____ Date _____

Signature of Student (if over 18 years of age) _____

If your child should require medical attention for injuries received or illnesses contracted prior to an activity, please send us the necessary information so that proper medical care may be given during his/her time with the Youth Ministry activity.

[PLEASE HAVE NOTARY FIX SEAL IN THE SPACE BELOW.]

State of _____
County of _____

On this _____ day of [month] _____, 20____, I hereby certify that the attached document is a true copy made by me from a record in my fair register of official acts.

In witness whereof I hereunto set my hand and official seal.

Signature _____

Notary Public _____

My commission expires on _____



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Name: _____

Page 2 of 2
PLEASE PRINT

HEALTH HISTORY

Pre-existing or present medical conditions:

Name and dosage of any medications that must be taken:

Any allergies?

Allergic to any medications?

Please check any of the following to make us aware of your child's condition:

- Hay Fever Heart Condition Diabetes Epilepsy/Nervous Disorders
- Asthma Frequent Stomach Upsets Physical Handicap Major illnesses in the past yr?

If any of the above are checked, please give details (i.e., include normal treatment of allergic reactions)

Date of Last Tetanus Shot _____ Contact Lenses? _____

Any swimming restrictions? Yes No What? _____

Any activity restrictions? Yes No What? _____

[PLEASE ATTACH PHOTOCOPY OF INSURANCE CARD TO THIS FORM.]

RVR Retreat/Outdoor Education

RELEASE AND WAIVER AGREEMENT

In consideration of being allowed to participate in activities at River Valley Ranch for the date(s) of _____ (dates) I, for myself and any minor children for whom I am parent, legal guardian, or otherwise responsible and for my/our heirs, personal representatives or assigns, hereby acknowledge the risks of injury or damage (to property, personal injury and/or death) involved in participating in the activities offered by River Valley Ranch including, but not limited to: paintball, archery tag, zip line, giant swing, high and low ropes course elements, climbing activities, bouldering, hiking, and horseback riding. I further understand that participation in these activities contains risks we each appreciate and voluntarily assume because the minor and we choose to do so. I further agree to require said minor to participate in all safety training and wear all safety equipment provided by River Valley Ranch for any of the above activities that require it.

I, for myself and any minor children for whom I am parent, legal guardian, or otherwise responsible, hereby release, acquit and forgive Peter & John Radio Fellowship, Inc. and River Valley Ranch, L.L.C., its principals, directors, officers, agents, employees, and volunteers (Releases) from any and all liability of any nature for any and all injury or damage (including property damage, personal injury, illness, paralysis, and/or death) to me or said minor children as the result of my/our participation in the activities listed above and below at River Valley Ranch.

I, for myself and any minor children for whom I am parent, legal guardian or otherwise responsible, and for my/our heirs, personal representatives or assigns, also hereby expressly waive any claim, lawsuit, complaint, charge, or cause of action against Peter & John Radio Fellowship, Inc. and River Valley Ranch, L.L.C., its principals, directors, agents, employees and for any and all injury or damage, to me or any such minor children and other persons as a result of my/our participation in the activities listed above and below at River Valley Ranch.

I, for my/our heirs, personal representatives and assigns also hereby expressly agree to indemnify and hold harmless Peter & John Radio Fellowship, Inc. and River Valley Ranch, L.L.C., its principals, directors, and employees, including costs, expenses and counsel fees, from and against all claims, lawsuits, complaints, charges or causes of action arising from the participation in the activities listed above and below at River Valley Ranch, and the activities for which this Release and Waiver Agreement is given.

I, for myself and any minor children for whom I am parent, legal guardian or otherwise responsible, give permission and consent to be photographed and/or filmed during activities and while on premises at River Valley Ranch (RVR). I further give permission and consent that any such photographs may be published and used by River Valley Ranch and the American Camp Association® and its agents, to illustrate and promote the camp experience, River Valley Ranch and its programs, or the American Camp Association.

Paintball Activities

I understand that my attendee, as a registered guest may participate in a variety of activities, which may include, but are not limited to: paintball (including the use of compressed air paintball markers) and Archery Tag (bows and arrows with large foam tips on the end). Paintball and Archery Tag both involve shooting projectiles at other participants and may include running. I affirm that I, and/or my child is in sufficient health to participate in the above activities. I give my permission to River Valley Ranch to transport my child, within the RVR's campus, from one activity to another by an authorized member of the RVR staff and within an authorized RVR vehicle, if deemed necessary. I understand that participation in these activities contains risk and I give my express permission for my attendee to participate in the program as designed by RVR.

Adventure Activities

I understand that my attendee, as a registered guest, may participate in a variety of activities, which may include, but are not limited to: zip line, high and low ropes course elements, climbing activities, giant swing, bouldering, Ninja Barn (warped wall, bouldering, balance elements), hiking (some of which may be strenuous) and camping out. Adventure activities are not suitable for pregnant women or participants over 250 pounds. I affirm that I, and/or my child is in sufficient health to participate in the above activities. I give my permission to River Valley Ranch to transport my camper, within RVR's campus, from one activity to another by an authorized member of the RVR staff and within an authorized RVR vehicle, if deemed necessary. I understand that participation in these activities contains risks and I give my express permission for my attendee to participate in the program as designed by River Valley Ranch.

Horse Activities

I understand that my camper, as a registered guest, may participate in a variety of activities, which may include, but are not limited to: horseback riding or horsemanship ground lessons. Horseback riding is not suitable for participants weighing over 230 pounds. I affirm that I, and/or my child is in sufficient health to participate in the above activities. I understand that participation in these activities contains risks associated with riding live animals and I give my express permission for my attendee to participate in the program as designed by River Valley Ranch.

Name of Participant (printed): _____ Age: _____

If Participant is OVER 18:

Signature of Participant: _____ Date: _____

If Participant is UNDER 18:

Signature of Legal Parent/Guardian: _____ Date: _____

Signature of Minor: _____ Date: _____