

The General Annual Notarized Release Form 2014-2015

WHAT DO WE NEED THIS FOR?

Dear Parents and Guardians,

Before the creation of the General Annual Notarized Release Form, church policy dictated that you as a parent or guardian had to fill out, sign, and notarize a different release form for every youth ministry event we held throughout the course of a year off the church campus. (i.e. Youth Week, swim parties, Christmas caroling, and other special outings for Halloween or weekends). This is not the case anymore! Yes, we still need a notarized permission slip for your student to participate in youth activities off campus at St. John's, but the good news is that we only need one form that will last the duration of the year instead of multiple forms throughout the year for each occasion.

WHAT THIS DOES NOT INCLUDE:

The General Annual Release Form is specifically for weekly events or special youth activities that we sponsor. Other events like M&M Trips, Conference Camps, ski trips, float trips, and special events requiring excessive physical activities are not included and will require their own notarized medical release forms. This is for several reasons. First off, we don't want your student to participate in anything potentially dangerous without your explicit knowledge and consent. Secondly, in many instances, such as Conference Camps, the Camp requires you to fill out its own special release forms anyway.

Thank you for your cooperation,
Jarrod Conyers
Director of Youth Ministries



General Annual Release Form

Addendum

Below you will find a list of activities that the St. John's youth group will or might participate in throughout the course of a year. They are listed below to give you a better understanding of what we do as a youth group and to give you the parental right to veto any particular activity that you do not wish your child to participate in.

Afterglows at other students' homes

Swim parties at other students' homes, a country club pool, or public pool

Park visits to a local park to play games

Dinner/food outings at a specified public restaurant

Movie nights at a specified theater to see a previously announced film

Missions/service events to perform a public service at a specified location such as physical labor at a worksite or serving food to the homeless down at another church or Food Bank

Fundraising activities on location at a specified public or commercial retailer

Amusement park events at Cliff's Amusement park

Skating events at a local skate rink or ice rink

Christmas caroling at elderly care facilities, local neighborhoods, or church member houses

Sporting events either local professional teams or high school competitions

Lock-ins and overnights at the church for fun and games

Lunch outings after church via rental van or private vehicle

Discipleship outings or invitations to go with Jarrod to spend time together

Sunday School outings to other churches or McDonalds across the street

Bible studies at different student's homes

Video rental nights or movie nights at different homes instead of the theater

Road trips or group excursions to specified chaperoned locations

Weekend retreats to a specified chaperoned location

Concerts for previously announced outings

Game nights board game, card game, and video game nights

Video scavenger hunts and other car trips around town w/ a volunteer driver

If there are any activities that you would prefer your student to not participate in, please write them on PAGE TWO of the General Annual Release Form.

St. John's United Methodist Church
Albuquerque, New Mexico

2014-2015

PERMISSION FORM, RELEASE, AND
MEDICAL AUTHORIZATION
(LIMITED POWER OF ATTORNEY TO ARRANGE FOR MEDICAL SERVICE)
FOR AN ILL OR INJURED MINOR

I, the Undersigned, am the parent or guardian of

_____, who is a minor under the age of eighteen (18) ("my child"). I give my permission for my child to participate in the following Event, sponsored by St. John's United Methodist Church, Inc., Albuquerque, New Mexico ("St. John's"):

All specified St John's Youth Group Activities (**SEE ADDENDUM**)
June 2014 - August 2015

Special event transportation: 15 passenger Church Vans
Special event transportation: Private Vehicles driven by qualified parents/volunteers

In consideration of St. John's, permitting my child to participating in **all specified St John's Youth Group Activities** and providing or arranging transportation for my child to and from any activity or event and St. John's, and in further consideration of my child's attendance at **all specified St John's Youth Group Activities** and of the sponsorship or promotion thereof by St. John's, acting for myself and for my child as her/his parent, guardian, or custodian, to the extent possible by the law, I release, discharge and acquit St. John's, its pastors, employees, staff members, volunteers, the driver and the owner of the vehicle(s) described above, and those pastors, employees, staff members, volunteers and others, not only from St. John's but also from other United Methodist churches, institutions, and agencies who provide services or facilities at or in connection with the Camp (collectively, "Church Representatives") from any and all liability, claims, causes of action and suits which I or my child might have or could bring arising out of **all specified St John's Youth Group Activities**, and out of transportation to and from **all specified St John's Youth Group Activities**, or in connection with any occurrences which take place at or during or while traveling to or from UMYF Solid Ground. This Release is intended to be a General Release of all claims, including but not limited to claims for negligence, breach of contract, and all other breaches of duty and obligations owed to my child by any of the Church Representatives, and their principals and their agents, except I do not intend to waive any rights to indemnity or damages payable for or to my child by any insurer providing liability insurance coverage, medical and hospital payment benefits, or property damage coverage, which might apply to my child. I waive and release all claims and damages in excess of all such insurance payable to or for my child, if any.

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St. John's United Methodist Church
Permission, Release and Authorization
All specified St John's Youth Group Activities
June 2014- August 2015

___ I request that my child not participate in the following activities (list in detail, if any apply from the ADDENDUM):

If my child becomes ill or sustains an injury, I understand that a reasonable effort will be made to contact me, if possible, before any medical services are rendered to my child. In the event my child should need immediate medical attention or treatment before I am contacted, I nominate and appoint **Youth Sponsor**, or any one of the St. John's Church Representatives, as my lawful attorney's-in-fact to authorize such medical care or treatment for my child as my attorney-in-fact shall deem necessary or reasonable, and to execute any and all necessary medical consent forms to authorize the care and treatment of my child by any medical personnel, physician or hospital, all for me and in my name as the parent of the minor named above, and all as fully as I might do if personally present. This appointment is for the period of **June 1, 2014 - August 31, 2015** inclusive. I accept financial responsibility for all medical care provided to my child pursuant to this Power of Attorney.

A photocopy of this document shall have the same effect as the original.

I affirm the following information regarding my child is true:

BIRTHDATE

ALLERGIES

CURRENTLY KNOWN DISEASES OR DIAGNOSIS

MEDICATIONS MY CHILD IS
CURRENTLY TAKING

MEDICATIONS MY CHILD
WILL BE BRINGING

**IF CHAPERONS WILL BE RESPONSIBLE FOR ADMINISTERING MEDICATION,
I HAVE ATTACHED DIRECTIONS.**

MEDICAL INSURER'S NAME AND ADDRESS

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Group Number

Subscriber Number

FAMILY DOCTOR

PHONE NUMBER

HOSPITAL PREFERENCE

Signature of Parent/Guardian

Name of Parent/Guardian (print)

Address: _____

Home phone:

Work phone:

Emergency contact person and their phone:

STATE OF NEW MEXICO
 ss.
COUNTY OF BERNALILLO

The foregoing instrument was SUBSCRIBED, SWORN TO, AND
ACKNOWLEDGED before me, a Notary Public, this ____ day of _____,
_____, by _____.

Signature of Notary Public

My Commission Expires:

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Rules of Behavior

These rules must be followed at **all** youth activities at the church or at any activity away from the church.

PROHIBITED ACTIVITIES: The parent/guardian and youth do hereby accept, by agreement, the responsibilities related to the following statement of prohibited activities.

1. The youth will not intentionally cause or attempt to cause damage to church or private property. If the youth should cause damage to church property, the church will seek restitution from the parent/guardian.
2. The youth will not intentionally cause physical injury to another.
3. The youth will not intentionally behave in such a way that might cause emotional distress to another.
4. The youth will not possess, handle, or transmit any object that could be considered a weapon.
5. The youth will not possess, use, transmit, or be under the influence of any narcotic, drug, marijuana, tobacco, or alcoholic beverage of any kind. (Exception would be for any drug that was prescribed by a physician and taken in accordance with professional instructions.)
6. Any violation of local, state or federal laws at the church or on any trip will subject the youth to appropriate disciplinary action by the adult sponsor.
The undersigned understand that all rules and policies that govern youth conduct at all times in connection with any church-sponsored activity.

Any violation of the church rules or any other church policy may result in any or all of the following disciplinary actions:

1. The parent/guardian assumes responsibility for any and all damages that may result from the youth engaging in any prohibited activity.
2. The youth could be excluded from participation in future church youth activities.
3. The youth may be sent home by the appropriate means of transportation, at parent/guardian expense, after the adult sponsor gives verbal notification to parent/guardian.

I have read the above and agree, as the party legally responsible for the youth, to all the terms and conditions of these **Rules of Behavior**.

Signature of Parent/Guardian

Date

I have read the above. I agree to the terms and conditions of these **Rules of Behavior**.

Signature of Youth

Date