

Youth Ministries

Health and Permission Form 2025-2026

To be kept on file for the school year. Please update any information as it changes throughout the year

Youth F	Full name:			
		Age:		
Grade:		School Name: _		
Home A	Address:			- 4
Name(s	s) of Parent/Lega	al Guardian:		
ě				
1.			Cell num	nber
E	Email Address:	7-7-		
1. I	Name	*	Cell num	nber
E	Email Address:			
Emerge	ency Contact			
	Nam	e	Contact #	relation
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, of			I, am the parent or gu a minor under the ac	uardian ge of eighteen (18) ("mv

child"). I give my child permission to participate in the youth ministries of St. John's UMC of Albuquerque, NM ("St. John's") and give my consent for the St. John's UMC's staff, adult sponsors and chaperones to take my child listed above on offsite outings and trips. I understand that Registration/permission forms must be signed for EACH event which my child will participate in prior to the event, which ensures that I have granted permission for them to attend and am notified of the details of the event. I give permission to St. John's UMC staff, adult sponsors, or adult chaperones to act 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, and those pastors. employees, staff members, volunteers and others 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 ministry Activities and out of transportation to and from all specified St John's Youth Group Activities. 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.

Transportation Permission:

I am giving permission for my child to be transported on youth trips or special events of the Youth ministries of St. John's UMC in personally owned or rented vehicles with at least one adult. I understand that I must provide or arrange transportation for my child to and from any activity or event and St. John's. I understand that youth are not allowed to drive other youth on St. John's UMC sponsored events

Photo/Social Media permission

I also give permission for my child's photo to be taken during ministries with St. John's UMC youth ministries and to be shared on youth social media (without personally identifying my child), unless otherwise stated below:

Consent for Emergency Medical Care

I give my consent to St. John's UMC staff, adult volunteers, and or qualified medical professionals to obtain urgent or emergency medical care for our child, and authorize health care providers to render such care as may be necessary. It is understood that reasonable efforts will be made to contact us or our emergency contact prior to obtaining such care, but we authorize such care and agree to be financially responsible for such care. We also understand that it is our responsibility to update our Youth's medical and insurance information as changes occur to ensure that proper treatment can be possible at all times. I accept financial responsibility for all medical care provided to my child pursuant to this form. A photocopy of this document shall have the same effect as the original.

I affirm the following information regarding my child is true:

Child's Medical Information

Allergies, diagnosis, or special health concerns we need to be aware of:					
s:					
Medications my child is currently taking	listed below:				
medication and I have attached direction	and chaperones to administer my child's s. Should my child need to self-administer nission to do so below and clearly stated which to carry and administer:				
Doctor Name	Phone #				
Hospital Preference (if applicable)					
Health Insurance Company Name Group #					
Prescribed person's name					
Employer					
Please also attach a copy of the insura	ance card to this form				

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 or property involved in the youth ministry activity, 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. The youth will not engage in any sexual activity while in attendance of any St. John's UMC youth events, trips or activities. 7. Any violation of local, state or federal laws at the church or on any trip will subject the youth to

appropriate disciplinary action, including reporting these to appropriate authorities and the parents/guardians of child.

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

Parent/Guardian Signature		date