

EAST LIBERTY PRESBYTERIAN CHURCH
REGISTRATION and PERMISSION SLIP for the
Middle School Mission Possible Trip
to Crestfield Camp in Slippery Rock, PA
July 8-13, 2018

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| FOR OFFICE USE Deposit Received \$ _____ Date: _____ |
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YOUTH'S NAME _____ BIRTHDATE _____ AGE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

SCHOOL _____ GRADE COMPLETED _____

PARENT/GUARDIAN NAME _____

PARENT/GUARDIAN PHONE (home) _____ (work) _____ (cell) _____

PARENT/GUARDIAN EMAIL _____

2nd PARENT/GUARDIAN NAME _____

2nd PARENT/GUARDIAN PHONE (home) _____ (work) _____ (cell) _____

2nd PARENT/GUARDIAN EMAIL _____

Additional Emergency Contact #1 _____ Phone No. _____

Additional Emergency Contact #2 _____ Phone No. _____

PARENT(S), PLEASE READ, CHECK, AND SIGN ... *If you have any questions, please feel free to call Sara Hackett, at 412-673-2926.*

I give my child permission to participate in the ELPC Junior High Mission Trip and they are permitted to be driven on this trip by an authorized driver appointed by the church.

I agree to pay \$225.00 cost of the mission trip and know that there is scholarship money availed upon request.

If for ANY reason my child is unable to complete the planned stay on the trip, I assume full responsibility for expenses incurred for my child's return home.

I give my child permission to take **Advil/Tylenol (circle one)** for relief of headache/fever/menstrual cramps.

In case of a medical emergency, I understand that every effort will be made to contact me. If I cannot be reached, I hereby give the East Liberty Presbyterian Church youth workers the permission to act on my behalf in seeking emergency treatment for my child in the event that such treatment is deemed necessary by the youth workers. I give permission for those administering emergency treatment to do so, using those measures deemed necessary. I absolve the youth workers and East Liberty Presbyterian Church from liability in acting on my behalf in this regard, so long as the youth workers are not grossly negligent. I understand I am responsible for any costs incurred for the medical care for my child.

I give permission to East Liberty Presbyterian Church to use photos of student mentioned on this form and to put the finished photos to any legitimate use without limitations or reservation.

Parent/Guardian Signature

date

YOUTH, PLEASE READ, CHECK, AND SIGN ... *If you have any questions, please feel free to call Sara Hackett, at 412-673-2926.*

I agree to participate in the team meeting on **MAY 27** and to be generally active in the ELPC community between now and our mission trip.

I agree to represent Jesus and the congregation of ELPC while on the mission trip by treating all those on the mission trip team, Crestfield staff, and who we are serving with kindness, respect and love. I will follow Crestfield's rules and guidelines. I will work to my best ability, joyfully play, and worship with an open heart.

Youth Signature

date