

Episcopal Diocese of Oregon Youth Ministry Registration/Release Form

B.R.E.A.D. - Bishop's Rave for Ecology And Discipleship

April 13-15, 2012

Arrival: 7:00 pm – Departure: 11:00 am

Name of Participant: _____

Address: _____

Phone (Home & Cell): _____

Email Address: _____

Age: _____ **Date of Birth:** _____ **Grade:** _____

Parish and City: _____

Name of Parent(s) or Guardian: _____

Parent/Guardian Cell Phone(s): _____

Parent/Guardian Email: _____

- **Medical Release:** As the parent or legal guardian of the minor named above, I understand that, in the event that emergency medical intervention is required for my child, every attempt will be made to contact me or the alternate contact provided. In the event that I or the alternate contact cannot be reached in an emergency during the course of this event, I hereby give permission to the physician selected by the event leaders to secure medical treatment and/or to order an injection, anesthesia, or surgery for my child as deemed necessary.
- **Liability Waiver:** I understand that all reasonable safety precautions will be taken at all times by the Diocese of Oregon and its agents during this event. I understand the possibility of unforeseen hazards and know of the inherent possibility of risk. I agree not to hold the Diocese of Oregon, its leaders, employees, or volunteer staff liable for damages, losses, diseases, or injuries incurred by my minor child, as named herein. I have carefully considered the risk involved and given my child permission to attend this event.
- **Photo Release:** I consent to the use, by the Diocese of Oregon, of any photographs or visual or audio recording in which my minor child may appear. I understand that these materials may be used for promotion of this event or of the youth ministry of the Diocese of Oregon, including recruitment and fundraising efforts. I understand that pictures and/or recordings of my minor child will not be given or sold to any third party.

Name of parent/guardian

Signature of parent/guardian

Date

The fee for this event is \$40. Scholarships and fee waivers are available. To discuss these, contact your church youth leader, or Beth Dieker (800-452-2562 or 971-204-4124 or email: bethd@diocese-oregon.org) Please make checks out to Diocese of Oregon and return registration forms and checks to Beth Dieker, Diocese of Oregon 11800 SW Military Lane, Portland OR 97219

Episcopal Diocese of Oregon Youth Ministry Medical Information Form

B.R.E.A.D
Bishop's Rave for Ecology And Discipleship
April 13-15, 2012

Name of Participant: _____

Address: _____

Phone (Home & Cell): _____

Email Address: _____

Age: _____ **Date of Birth:** _____ **Grade:** _____

My child has the following medical conditions, allergies, food restrictions, learning challenges:

My child takes the following prescriptions or over-the-counter medications:

My child is NOT to take the following medications (i.e. Tylenol Ibuprofen, etc.)

Medical Insurance Carrier: _____

Name of Primary Insured: _____

Policy & ID Numbers: _____

In the event I cannot be reached in an emergency, please contact:

Name/Relationship: _____

Phone: _____

Name of parent/guardian

Signature of parent/guardian

Date