

Parker United Methodist Church

2017 Student Ministries Permission Slip and Information Update

Name	Graduation Year		
Address	City	Zip	
Subdivision			
Male/Female (circle one) School	Grade	Date of Birth	
Home Phone	Student Cell		
Name of Parent(s)/Guardians			
Parent/Guardian Work Phone	Cell P	hone	
Parent/Guardian Email Address			
Medical Information is required for activities of	f-site from the church		
Any medical or allergy information we should k	now about?		
Any special medication your child is using?			
Health Insurance carrier	Policy Number		
Name and phone number of student's doctor			
Emergency contact			
Name	Phone	Relationship	
Photos/Videos: Parker United Methodist Church youth groslideshows, even announcements, and posts on social medi			os,
		Yes No Initals	S
Permission The above-named student has my permission to attend and Activities.	participate in all activities	sponsored by Parker United Methodist Churc	h Youth
In case of emergency, I give my permission to the physicia representative(s), to provide necessary medical treatment for		nistries Staff Members, or their appointed adul	lt
I further release and discharge Parker United Methodist Chand against any liability or claim arising out of or relating tactivity, including but not limited to, events and travel to an	to the above-named studen		
Signature of Parent or Guardian		Date	



PUMC Youth Covenant for Events

As followers of Christ I would hope that we would ALL exhibit expected and appropriate behaviors of Christians. So, while in attendance of Youth Group activities on and off-site, I ask that you agree and abide by the following:

- To be inclusive to all especially those who may feel alone or left out. To not be exclusive and intentional on leaving others out of activities.
- To use kind and uplifting words to everyone in attendance not just adults. To not use "put down" words, phrases *or even looks* that hurt others, or *inappropriate words* or language.
- Please *refrain* from using your phone during group activities. Even during free time, spending time with your phone appears like you are not interested in spending time with others in the group. Please try to be welcoming and not closed off.
- Viewing inappropriate material on your phone is also not permitted, and if shared can (in some cases) be considered against the law.
- We will not tolerate the use of alcohol, tobacco, inhalants, weapons or illegal drugs of any kind at *any* youth activity.
- Stay with the group. You should not be off by yourself in any part of the church or any other facility we are visiting, unless it is part of the whole group game (hide and seek).
- Expressions of encouragement, support and caring are great! However, youth group is not a place to be considered "on a date." So save romantic expressions for *actual* dates and *not* youth events.

If you have trouble following these guidelines we will have a discussion and see if we cannot clear up the problem. However, if the violation of this covenant *is continuous* or a detrimental decision regarding weapons, drugs/alcohol - you will be asked to leave the event.

Youth Signature	Parent Signature



Youth Winter Retreat at the Great Wolf Lodge in Colorado Springs

Intent to Attend Form

WHEN	February 10 - 12, 2017		
TIME	Meeting at PUMC to carpool at 5 PM. Depending on number of registrations/chaperones, I may need some parent volunteers to help drive us to Colorado Springs.		
RETURN	Returning to PUMC around 12 - 1 PM Sunday, Feb. 12.		
LODGING	Rooms have two queen beds. If students feel uncomfortable sharing a bed they can bring a sleeping bag to either put on the bed or on the floor.		
COST	4 people per room \$150 due no later than January 9, 2017. 2 people per room \$229 due no later than January 9, 2017.		
students can snacks must those must r Saturday bre	rive in Colorado Springs Friday evening, we will stop at a fast food location, so have dinner. They will need to bring some extra money for this. Also, outside be kept in the hotel rooms. So, students may bring snacks in their suitcase, but emain in their room. I encourage this, as we are only covering the following meals: eakfast, lunch and dinner and also Sunday breakfast. Students may want to bring for hotel snacks and/or souvenirs.		
Student Na	me		
	ck one: d like 4 people per room. d like 2 people per room.		
I am a	Jr. High Sr. High. / male female		
PAYMENT	OPTIONS		
I plar	hed is a check for the whole amount \$150 or \$229 1 to make 2 payments \$75 (x 2) or \$114.50 (x 2)		

Please see the opposite side/2nd page for roommate information.

ROOMMATES

All roommates will be of the same gender. I will place you with the roommate you request as long as that person also requests you. So, please talk with a friend about rooming together prior to filling out this form.

Requested Roommate:
I choose to go single and meet new friends! (Please trust that I will do my best to put you with people who are welcoming and will be a good fit for you.
f there are four people who would like to room together, please list the other 2 youth here. In the will also need to list you on their form. This is not a guarantee
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CHAPERONES
chaperones will not have to pay, but will need to help lead small group discussions, monitor outh behavior and will also need to be in the waterpark area with the youth during that time.
es, I am interested in chaperoning
Jame: Male Female
Contact Phone Number:
Contact Email: