

Youth Lock-In Permission Slip and Release Form

I, (*print name*) _____ hereby give my child, (*print name*) _____, permission to attend the Fishers Island Union Chapel UCC Lock-In on Friday, July 12 at 7:00 p.m. until Saturday, July 13 7:00 a.m. and to participate in all of the games and activities related to this event.

Signature of Parent or Legal Guardian: _____ Date: _____

Parent/Guardian's Email Address: _____

Parent/Guardian's Phone Number: _____ Cell Phone: _____

Youth's Name _____ Age _____ Date of Birth _____

Address: City /State /Zip _____

Youth's allergies _____ Youth's medication(s) _____

Other information _____

Release

I, the undersigned parent or legal guardian of the child named above, do hereby grant my permission and consent for the said child to attend and participate in the events and activities of Fishers Island Union Chapel UCC. Permission is granted for my child to receive medical care if: (1) such care is deemed necessary by the persons in charge of the event; (2) the proposed medical treatment or procedures are immediately or imminently necessary and any delay occasioned by an attempt to obtain my parental consent would reasonably jeopardize the life, health, or wellbeing of the child affected; (3) I cannot be personally contacted.

I further agree not to hold Fishers Island Union Chapel UCC or any of its paid staff, Trustees, or volunteers responsible for any accident that may occur during this event. I indemnify, defend and hold harmless Fishers Island Union Chapel UCC for all claims made and liabilities assessed against them as a result of any activity. I release Fishers Island Union Chapel UCC and all medical providers from liability in acting on my behalf in this regard and rendering such medical treatment. I assume the risk and financial responsibility for any injury resulting from any event or activity. Furthermore, I understand and assume the expenses of any property damage caused by my child. Should it be necessary that my child return home due to disciplinary action, I will be contacted by the leaders and will be responsible to pick my child up. By signing below, I am acknowledging that I have read through and understand the above statements.

Signature of Parent or Legal Guardian: _____ Date: _____

Rules

All youth must sign this sheet below, indicating their agreement to these rules.

No one is allowed to attend the lock-in without a signed permission slip and contact numbers. Participants will not be allowed to go outside of church. Use your body respectfully: no revealing clothing, no PDA, no chasing or hurting others. No personal video games or electronic devices (cell phones will be allowed for emergencies only). Special medication or required items should be indicated above and given to the Chaperones. No smoking, vaping, illegal drugs, alcohol, dangerous materials, or firearms. All participants must respect others' physical boundaries. Inappropriate behavior (i.e., physical intimacy or sexual harassment) is not permitted and will NOT be TOLERATED. Same gender sleeping quarters will be provided. Lights out/quiet hours will be observed in these areas. Take care and clean up after yourself. Be considerate of others and respectful of the church. Violation of these rules will result in disciplinary action and may include the participant being asked to leave. Parents or guardians will be called to pick them up regardless of the hour. The enforcement of rules is everyone's responsibility.

I have read the above rules and agree to abide by them.

Youth Signature _____ Date _____

Things to Bring

Sleeping bag or blanket, pillow, pajamas, slippers (appropriate evening wear)

Personal items (toothbrush, toothpaste, comb, deodorant. etc.)