

**Y.E.A.H. 2010
Registration and Release Form**

Name: _____ Youth _____ Adult _____

Age: _____ Grade: _____ Sex: Male Female T-Shirt Size: S M L XL XXL

Church: _____

Youth Director: _____

Parent/Guardian
Name(s): _____

Home Phone: _____ Emergency Phone: _____

Medical Information:

Handicapping Condition or Physical Limitations: _____ if yes, please describe in detail on back.

Recent Illnesses: _____ Allergies: _____

Date of Last Tetanus Shot: _____

Current Medications: _____

Medical Insurance Co.: _____

Policy # _____

***Please attach a front & back copy of insurance card(s) to this document**

I understand that by participating in this event I will abide by the Temple District Code of Conduct and the CTCYM Covenant of Conduct which includes no alcohol or illegal drugs, no smoking or dipping, no inappropriate sexual behavior, no inappropriate language, no willful destruction or abuse of property, no items that might interfere with the purpose of the event (such as fireworks, skateboards, mp3 players, etc.). No leaving the event and no late arrivals or early departures without permission in advance from Amanda Slaten or Derriel Oatman so that we have adequate help to complete the job.

Signature of Youth/Adult Date

I give my permission for my youth to attend this event and authorize the sponsors to provide any necessary medical treatment for my son/daughter. I agree to hold harmless First United Methodist of Temple or the Temple District of the United Methodist Church and it's assigns if my student is injured while at this function.

Signature of Parent or Guardian Date

This form must be filled out for each participant and returned with payment to your youth director.