

Youth Activity Covenant and Permission Slip

Because God calls us to be a community of faith and leaders in Christ's church, I covenant with God and other participants to conduct myself in a manner that promotes a healthy, meaningful, fun and safe community of faith for everyone.

I _____, promise to:

1. treat all people with dignity and respect.
2. listen to and take direction from the leaders
3. participate to the best of my abilities in activities and conversations
4. treat all facilities with care, taking responsibility for any damage I do, and cleaning up after myself
5. not interrupt my fellow students or leaders
6. respect other people's personal space and boundaries
7. follow the rules about cell phone and electronics usage negotiated by the youth and youth leaders for this particular activity.
8. not make comments that are mean-spirited toward or about others
9. not make inappropriate comments of a sexual nature

Also,

10. I promise not to bring or use tobacco products, alcohol, illicit drugs, or weapons
11. I promise not to engage in sexual activity
12. I promise to honor "lights out" when on an overnight outing or during a lock-in

I understand that if I do not keep my commitment to this covenant, the following sequence of interventions will be implemented: first, I will be asked nicely to stop whatever behavior is causing a disruption; second, I will be separated safely from the group until I can return to the group without disrupting it; and, finally, my parents will be called and will be asked to pick me up.

Youth's Signature _____ Date _____

Kirkwood United Church of Christ Permission/Release Form

I give my permission for _____ to go with Kirkwood U.C.C. to
_____ on _____

(Location/Name of Event)

(Date)

I further authorize the advisor(s) to take appropriate disciplinary action as outlined above. This may include sending my son/daughter/youth home at my expense. I further authorize the advisor(s) to make arrangements for whatever emergency medical treatment may be necessary for my son/daughter/youth while on this trip. By signing I accept full responsibility for all costs incurred by such medical treatment.

Parent/Guardian's Signature _____ Date _____