

Youth and Children’s Ministry Participant Release of Liability and Assumption of Risk Agreement

_____ (full name of youth participant) has my permission to attend youth ministry programs hosted by the Episcopal Diocese of Upper South Carolina for the 2023-2024 academic year.

I, _____ (parent/guardian or adult participant), understand that all reasonable safeguards will be taken but that the Episcopal Diocese of Upper South Carolina, Gravatt Camp and Conference Center, any other host location, and the leaders of these events are not responsible for any accident, illness, injury, or damage or consequence resulting from participation in the events, unless such accident, illness, injury or damage results from the gross negligence or wanton misconduct by or on behalf of the Episcopal Diocese of Upper South Carolina, Gravatt Camp and Conference Center, any other host location, and/or the leaders of the events.

I knowingly and freely assume all risks of accident, illness, injury, or damage, both known and unknown, even if arising from the negligence of those persons or entities released from liability in this document.

I hereby release and hold harmless The Episcopal Diocese of Upper South Carolina, any other facility at which events are held, and the leaders of these events, their employees, agents, officers, and directors (“releases”) with respect to any and all injury, disability, death or loss, or damage to person or property, whether caused by the negligence of the releases or otherwise, except that which is the result of gross negligence and/or wanton misconduct.

In case of medical emergency, I hereby authorize and consent adult leaders approved by the Diocese to transport the participant to receive appropriate care. I also hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care that is deemed advisable by, and is to be rendered under, the general or special supervision of any licensed medical personnel on the staff of and any licensed hospital. This authorization is given in advance of any specific diagnosis, treatment or hospital care required, but is given to provide authority and power to render care, which is deemed advisable in the best judgment of the physician.

I also release the Episcopal Diocese of Upper South Carolina to record my/my child’s likeness, via still photo, video, or audio recordings, for use as promotional material for the Diocese. I understand that these recordings may be edited at the discretion of the Diocese, and that they may be published in promotional videos, brochures, diocesan newspapers, and diocesan websites. I hereby waive all rights to compensation for the use of these recordings.

Participant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Participant Medical Contact Sheet

Medical Insurance

Medical Insurance Policy Holder: _____

Medical Insurer and Policy Number: _____

Medical Insurer Phone Number: _____

Primary Physician: _____

Primary Physician's Number: _____

Dental Insurance (if applicable)

Dental Insurance Policy Holder: _____

Dental Insurer and Policy Number _____

Dental Insurer Phone Number: _____

Dentist Name: _____

Dentist Phone Number: _____

Behavioral Health (if applicable)

Counselor/Therapist Name: _____

Counselor/Therapist Number: _____

Formation Ministry Community Covenant

- **NON-NEGOTIABLE:** I will not bring or use alcohol, illegal drugs, tobacco products of any kind (including vape pens), firearms, explosives, knives, or fireworks to the host site or steal, misuse, or willfully damage the property or equipment of others or the facility and grounds of the host site
 - Neglecting to abide by the non-negotiables will result in the participant being sent home at their own expense. If any of the above items are on the participant’s person, they will have an opportunity to place them in a secure location under the supervision of the leadership until the event concludes.
- I will respect the boundaries, needs, and dignity of others—sexually, racially, health-related and otherwise—and will refrain from inappropriate behavior, including, but not limited to, bullying, gossiping, name-calling, teasing or mocking, commenting negatively on someone’s appearance, using explicit language, discussing vulgar material, or physical altercations.
- I will approach the retreat and all scheduled activities with an open mind, welcoming the opportunity to meet new people, try new things, grow in faith, and have fun.
- I will abide by the expectations of the retreat leadership regarding the schedule, prescribed boundaries, curfew, quiet times, and sleeping areas, and I will treat the retreat leadership—youth and adults—with respect.
- I will be present—both physically and mentally—for the entire event and participate in all scheduled activities as I’m able. As such, I will only use electronic devices (e.g. cell phones, gaming consoles, etc.) when it is not distracting from and disruptive to the community.
- If I drive to the event, my vehicle will be parked in a designated area, and I will not leave the host site for the duration of the event.

I understand the above expectations are designed to create a safe and healthy environment for the community. I agree to adhere to these guidelines, and I understand if I choose to break the non-negotiables, I will be removed from the community for this and future events until a process of reconciliation takes place. Furthermore, I understand in all cases of misconduct or violation of the expectations, the adult-in-charge will consult with the appropriate retreat leadership after the **first offense** to determine reasonable consequences before speaking with me; if I willfully commit a **second offense**, I understand my guardians will be contacted, and I will be sent home at my own expense or otherwise separated from the retreat community. Lastly, I understand that if the first offense is deemed severe enough, I will be sent home.

Participant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____