

### Children & Youth Information Form

This form is a separate Release and Medical Form and Youth Covenant for the 170<sup>th</sup> Regional Assembly of the Christian Church in Georgia which must be completed for each child/youth and returned by **November 5, 2022**. Please note that all children and youth attending the 170<sup>th</sup> Regional Assembly also must be registered for the event at [www.gadisciples.org/regional-assembly](http://www.gadisciples.org/regional-assembly).

\_\_\_\_\_  
Child/Youth Name

\_\_\_\_\_  
Guardian Name

\_\_\_\_\_  
Mailing Address Line 1

\_\_\_\_\_  
Mailing Address Line 2

\_\_\_\_\_  
Primary Phone #

\_\_\_\_\_  
Email

\_\_\_\_\_  
Church Name/City

#### Instructions:

1. Fill out form completely. Youth grades 6<sup>th</sup>-12<sup>th</sup> must read and sign Youth Covenant.
2. Make a copy of child's insurance card (both sides) to send with this form.
3. Email copies of this form and insurance card to [jalisa@gadisciples.org](mailto:jalisa@gadisciples.org). Form and copy of insurance card may also be mailed to the Christian Church in Georgia, 2306 Vineville Ave., Ste. B, Macon, GA 31204.

### Release & Medical Form

*Children/Teen (Infant to 12<sup>th</sup> grade/ age 18*

I hereby give my permission for child/teen to participate in the 170th Regional Assembly for the Christian Church (Disciples of Christ) in Georgia on November 11-12, 2022. I give permission for my child to be transported by bus/van and to walk with their group to planned activities lead by adult chaperones. In consideration for the Christian Church (Disciples of Christ) in Georgia; I agree to release from liability the Christian Church in Georgia and its staff, volunteers, board members, officers, as well as First Christian Church in Athens, GA, and Union Christian Church for any damages or injuries sustained to property or persons arising out of, or in connection with, activities conducted by of through the Christian Church in Georgia during the 170th Regional Assembly. By registering my child for this event, I acknowledge that he/she may be photographed during the event. I give permission for the Christian Church (DOC) in Georgia to post my child's photos on its website and social media and use the photos in publicity to promote future events sponsored by the Christian Church in Georgia.

\_\_\_\_\_  
Parent Signature Date

In case of illness or accidental injury, I give authorization to the chaperones for treatment for the illness or injury, if I am unable to be reached.

\_\_\_\_\_  
Parent Signature Date

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Emergency Contact Phone #

### Medical Information

*Include a clear copy of child's insurance card (both sides).*

Allergies:

\_\_\_\_\_  
Medication:

\_\_\_\_\_  
Doctor's Name & Phone #

### Youth Expectations & Covenant

*Grades 6th – 12th*

I promise to participate fully in the activities/programs; to be respectful of my peers, my chaperones, the property and myself. I promise not to possess any illegal substances or firearms. I understand that transportation will be provided for me to events associated with the 166th Regional Assembly. By signing this statement, I am in agreement with the expectations stated

\_\_\_\_\_  
Signature of Participant Date