FIRST BAPTIST CHURCH LONGVIEW

STUDENT MINISTRY & STUDENT WORSHIP MINISTRY RELEASE FORM

Student Release and Hold Harmless Agreement/Image Waiver for events and activities from August 1, 2019-August 31, 2021

PLEASE ATTACH A COPY OF FRONT & BACK OF STUDENT'S CURRENT INSURANCE CARD

I LLAGE ATTACITA	A GOLL OLL KONT & BAGK OF GLOBENT O GOKKENT MOOKA	HOL OAKD		
agents, servants, and from any and all claim and/or claims for any bactivities and any negli employee of FIRST BACT (YOUTH NAME) It is my responsibility to	NAME) and by this inst, hold harmless and forever discharge FIRST BAPTIST CHURCH OF LO employees, and all persons, natural or corporate, in privacy with them or is or causes of action of any kind whatsoever, including but not limited to bodily injuries, death or property damage which may be sustained by (YOU while participating in any activity, or activities, including travel to a igence or lack of care due or claimed to be due to the conduct of any age APTIST CHURCH OF LONGVIEW. By signing this agreement, I give my provide current and correct insurance information to the Student Minist date such information should it change within the year.	ONGVIEW, its any of them actions, suits TH NAME)and from such the servant, or permission for any or actions.		
Date:	Parent/Legal Guardian Signature			
	Parent/Legal Guardian Signature			
RESPONSIBILITY TO CONSENT AND WAIV I hereby allow photograpublished via print, value of the publication may be a photographs and video waive any claim for data.	HANGES AT ANY TIME DURING THE YEAR, I UNDERSTAND IT IS MY NOTIFY THE STUDENT MINISTRY & STUDENT MUSIC MINISTRY OFF YER REGARDING THE USE OF PHOTOGRAPHS AND VIDEO Taphs and video of my child's participation in First Baptist Student Ministry video, or website which are affiliated with First Baptist Church. I un accomplished electronically via the Internet/World Wide Web, copying there from, and subsequently using, altering, or republishing it without remandes against the Church from the un-consented-to use, alteration, or respond to the parties accessing the Internet/World Wide Web or observed.	v Events to be derstand that g my child's my consent.		
SIGNATURE OF PAR	RENT or Legal Guardian:			
Printed Name of PARI	ENT or Legal Guardian:			
Printed Legal Name of	f STUDENT:			
Date:				
Student Cell #	Student Birthdate			
Mom Cell #	Dad Cell #			

FIRST BAPTIST CHURCH STUDENT MINISTRY MEDICAL INFORMATION AND HISTORY FORM

After competing form, please sign and date at the bottom.

NAME:		_AGE:	DOB:	GR	ADE:
ADDRESS:					
Street		City	State	ZIP	
HOME PHONE:			Please Cir	cle: Male	Female
EMERGENCY CONTACT:_		F	PHONE#	or_	
HOSPITAL INSURANCE?_	(INSU	JRANCE I	NFO ON OTHER S	IDE OF FOR	M)
INSURANCE COMPANY N	AME:				
(please attach a copy of front & back o					
List date of last immunizatio	n: DPT:		Tetan	ius:	
	MMR	:	Polio:		
Check if you have had:	Chicken Measles Mumps		Whoopi	ng Cough	
Please list any allergies:	Foods		Insects		
	Medicines				
Previous Serious Illnesses: _					
Current medications and dos	ages:				
Special Dietary Issues:					
Other:					
SIGNATURE OF PARENT	or Legal Guard	lian:			
Printed Name of PARENT of	or Legal Guardi	an:			
Printed Legal Name of STU	DENT:			Dat	e:



FBCL – THE RISE DNOW WEEKEND

WHAT TO BRING:

- BIBLE, journal & pen
- Signed 2019 medical release form
- Jacket
- Sleepwear
- Modest clothing
- Toiletries and towel
- Water bottle
- Personal snacks (optional)
- Sleeping bag & pillow (packed in a trash bag with student's name clearly marked)

MEDICATIONS

Any medications must be kept in its package/bottle and placed in a Ziploc bag with dosage instructions with the student's name clearly written on the outside of the bag. These will be turned into leaders at host homes immediately upon check-in.

REGISTRATION

Forms can be found in the HUB for your friends or the church office. You can also sign-up on the FBCL website – fbcl.org.

TIME AWAY

A parent signed 'Time Away' form is needed for a student to leave during the weekend. These forms can be found in the HUB during or prior to check in. NO ONE IS ALLOWED TO LEAVE WITHOUT A FORM!!! NO STUDENT IS ALLOWED TO DRIVE THEIR OWN CAR TO/FROM EVENTS without prior written parent consent and approved by Cam.

CELL PHONES

Cell phones are allowed for pictures and video at the Belcher Center but will be taken up while at host homes. Bring your real Bible so an app is not needed. Any misuse of this rule will result in the student's phone being taken away until Sunday. We want students involved in the weekend, not social media.

STUDENTS MUST STAY WITH FBCL - NO WANDERING AWAY!

FBCL RISE STUDENT SCHEDULE

THURSDAY, JAN. 30

Grab dinner before you come!

5:45 p.m. – Check in at the HUB & leave with groups for the Belcher Center.

6:15 p.m. – Depart from HUB

8:45 p.m. – Parents pick up students at the HUB

FRIDAY, JAN. 31

Grab dinner before you come!

5:40 p.m. – Check in at the HUB Put stuff in host home groups (all items will be taken to host homes for students)

6:15 p.m. – Depart from HUB

10:30 p.m. – Return to host homes

SATURDAY, FEB. 1

Full Day of "The RISE"

SUNDAY, FEB. 2

12:00 p.m. – Parents pick up students at FBCL HUB

IMPORTANT NUMBERS

Cam Reynolds

Youth Pastor 903-241-6016

Vickie Brewer

Cam's Assistant 903-399-4457

Sean Goram-Welch

Transportation 903-455-4445

Lane

Guys' Youth Intern 903-930-2509

Helen

Girls' Youth Intern 903-975-5143

TIME AWAY FORM | THE RISE DNOW 2020

If for any reason you will need to leave at any time during the weekend, please provide the

following information:			
Student's Name:	Grade:		
Day Leaving:	Departure Time:		
Reason:			
Day Returning:	Return Time:		
Day Leaving:	Departure Time:		
Reason:			
Day Returning:	Return Time:		
Who will be picking up your student?			
Parent Cell #	Student Cell #		
Parent / Legal Guardian Signature	Date		

WE MUST have this signed sheet on file before we will allow your child to leave/return to this event.

Student Release and Hold Harmless Agree	ement/Image Waiver
My name is (PARENT NAME)	and by this instrument,
I do hereby release, acquit, hold harmless and forever disch	
CHURCH LONGVIEW, its agents, servants, and employees,	and all persons, natural or
corporate, in privity with them or any of them, from any and	all claims or causes of action
of any kind whatsoever, including but not limited to actions,	suits and/or claims for any
bodily injuries death or property damage which may be sus	tained by (YOUTH NAME)
while participating in any activ	ity, or activities, including travel
to and from such activities and any negligence or lack of ca	re due or claimed to be due to
the conduct of any agent, servant, or employee of FIRST BA	APTIST CHURCH LONGVIEW.
By signing this agreement, I give my permission for (YOUT	H NAME)
TO RECEIVE MEDICAL ATTE	NTION IN THE EVENT OF AN
EMERGENCY . It is my responsibility to provide current and co	orrect insurance information
to the Student Ministry offices and my responsibility to update	ate such information should it
change within the year.	
Consent and Waiver Regarding the Use of P	hotographs and Video
I hereby allow photographs and video of my child's participa	ation in church events to be
published via print, video, or website which are affiliated wit	h FIRST BAPTIST CHURCH
LONGVIEW. I understand that publication may be accompli-	shed electronically via the
Internet, copying my child's photographs and video there from	om, and subsequently using,
altering, or republishing it without my consent. I waive any	claim for damages against FIRST
BAPTIST CHURCH LONGVIEW from the un-consented-to-u	se, alteration or republication of
my child's photographs and video by third parties accessing	the Internet or obtaining copies
of the print or video material.	
Parent / Legal Guardian Signature	Date