

LA JOLLA PRESBYTERIAN CHURCH REGISTRATION FORM FOR ROSARITO, MEXICO MISSION TRIP

February 6-9, 2015

The fee for this trip is \$190. To reserve your place on the team, you must complete this form. We are partnering with La Crescenta Presbyterian Church, and they are collecting the money. You can bring this form, plus a check made out to LCPC to the La Jolla Presbyterian Church office, or give it to Jim Sedgwick at LJPC

SECTION I: CONTACT AND MEDICAL INFORMATION (for all participants) *Print your name legibly as it appears on your passport:*

Last Name Middle Name First Name Sex: M F

Home Address email: _____

_____/_____/_____
Date of Birth _____/_____
Home Phone _____/_____
Cell Phone ___Adult ___ Student ___ Grade (if student)

FOR PARTICIPANTS UNDER AGE 19:

Name – Father/ Guardian _____/_____
Work Phone _____
email _____

Name – Mother/ Guardian _____/_____
Work Phone _____
email _____

FOR EVERYONE:

PASSPORT NUMBER, EXPIRATION DATE: # _____ Expires: _____

Immunization: Are all immunizations and shots up to date? ___ Yes ___ No

List any allergies you have: _____/_____/_____

List any medications you take: _____/_____/_____

List any medication allergies you have: _____/_____/_____

Eating Habits: Are you a... ___ Red meat Vegetarian? ___ All meat vegetarian?

Insurance Co. _____ Policy # _____ Group # _____

Billing Address: _____

Physician (if any): _____/_____
Name Phone #

SECTION II: MEDICAL RELEASE (left side if parent of youth; right side if age 18 or older):

For the Parent, or Legal Guardian of Youth under 18:

"I, the Parent, Agency Representative or Legal Guardian, hereby give consent to La Crescenta Presbyterian Church (Staff, Leaders, Advisors, Representatives) to provide all emergency dental or medical care prescribed by a duly licensed physician (M.D.) or dentist (D.D.S.) at a hospital, clinic or medical office to my child.

"This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my child."

Signature

Date

For Adults Age 18 or Older (Including LCPC Staff, Leaders, Advisors, Rep.):

"I, the undersigned, give my permission to any licensed physician (M.D.) or dentist (D.D.S.) at a hospital, clinic or medical office to provide for me all emergency dental or medical care that has been selected by one of the event/trip Staff, Leaders, Advisors, and/or Representatives."

Signature

Date

SECTION III: FOR PARENTS/ GUARDIANS OF STUDENTS UNDER AGE 19:

"My child/ guardian, _____, [WRITE NAME] has my permission to participate in the Rosarito Mexico Mission Trip planned by La Crescenta Presbyterian Church for February 6-9, 2015. I understand that this may involve working on a construction site with tools such as picks, shovels, power tools and concrete mixers; beach trips; and field trips in buses, vans or cars. I understand that the pick up/drop off of my child by another parent or representative after the event will not be permitted without prearranged permission from the child's parent/guardian with the LCPC trip leaders. I have read the Covenant below and I agree to pay any expenses incurred during travel if my son or daughter violates the Covenant and is therefore sent home early. I also understand that the fee of \$190 is due on February 3, 2015, that the fee is non-refundable after that date."

Signature

Date

SECTION IV: COVENANT FOR ALL PARTICIPANTS (students and adults):

All participants of Rosarito Mexico Mission Trip 2015 are expected to enter into the following covenant:

"I pledge to follow and uphold the following rules. I will...

...show respect for others and try to spread good cheer to all.

...respect the authority of the staff, leaders, and advisors.

...respect others' privacy, stay clear of areas designated off limits to the opposite sex, and work to keep our living space clean.

...be on time for and participate fully in all designated group activities, including meals, talks, small group meetings, travel, work, recreation and worship.

...inform the staff, leaders, and/or advisors before I make short trips with friends, and abide by the established curfew.

...exhibit modesty in my relations with the opposite sex.

I will NOT: travel or swim alone or otherwise endanger myself, drink alcoholic beverages, take drugs (prescription drugs excepted), or use tobacco products.

"I understand that the registration fee of \$190 is non-refundable after 2-3-15."

Team member's signature (youth or adult)

Date

SECTION V: FOR STUDENTS UNDER AGE 19 (skip if you are age 19 or older):

"I understand that if I fail to uphold this Covenant I may be sent home early at the expense of my family, and that I may be prohibited from participating in future trips with LCPC."

Team member's signature (youth)

Date

SECTION VI: EMERGENCY CONTACTS

A. Contact in case of emergency:

Name (someone other than parent): _____ Phone: _____ / _____

B. FOR PARENTS ONLY: Is there anyone NOT authorized to pick up your child? _____

SECTION VII: DONATIONS TOWARDS THE "SUPPLIES BUDGET" Our team will be

spending several thousand dollars for construction supplies and other items we will need to complete our projects. You are invited to make a special donation to help with these expenses. *Participants are not obligated to give; we appreciate any donation you can offer.*

"I have included with my registration a separate check (to "LCPC," noted "Donation – Rosarito Orphanage supplies") in the amount of:

__ \$25 __ \$50 __ \$100 __ \$150 __ \$200 __ \$300 __ \$500 \$_____ Other