

Emergency Contact and Medical Information

Parish / Location: _____

Child's Name: _____

Address: _____

_____ M F
Date of Birth Sex

Parent's/Guardian's Name: _____

Parent's/Guardian's Name: _____

(()) _____

Home Phone Work Phone

(()) _____

Home Phone Work Phone

Primary Emergency Contact: _____

Health Insurance Company: _____

Name of insured: _____ Policy Number: _____

(()) _____

Weekend Phone Home Phone

Physician: _____ Phone Number: _____

List any medications taken and current dosages: _____

List of Allergies and / or special needs or concerns: _____

List of Food allergies: _____

Can this person be given the following by our medical coordinator?

Aspirin? Yes No Acetaminophen? Yes No Ibuprofen Yes No

I hereby certify that the above information is correct and give permission for my child to be transported in privately owned vehicles for medical emergencies only, and for the release of medical records to an attending health worker in case of illness. I understand that every effort will be made to contact the parent / guardian. If one cannot be contacted, I hereby give permission for a qualified physician to secure proper treatment for my child.

Parent / Guardian Signature: _____ Date: _____

CODE OF CONDUCT: Your signature below indicates your willingness to comply with the following rules:

- A youth may not drive to the retreat. No cars allowed.
- The purchase, possession or consumption of alcoholic beverages or the possession or use of illegal drugs will not be tolerated. FAILURE TO COMPLY WILL RESULT IN IMMEDIATE DISMISSAL FROM THE EVENT.
- Cigarette smoking and chewing of tobacco will not be allowed by minors.
- Room checks will be made unannounced.
- Bring comfortable, acceptable clothing – we will be inside most of the time
- Socializing between boys and girls will occur only in meeting areas, dining areas – NOT IN PRIVATE ROOMS.
- Youth must obey the directions of the leaders and be on time for gatherings, meals, etc.
- Youth must remain in their rooms after curfew – no moving about the halls. Hall monitors will be in place to monitor halls after curfew.
- Phones and TVs are off limits in your room – you will be too busy. Don't bring cell phones – let the world live without you for a few days.
- PEER LEADERS will be in each room of two or more youth. Bring favorite pillows, stuffed animals. Boys who do not like to sleep in beds with others should consider bringing a sleeping bag.

We have read the information / expectations on this form and agree to abide by the Code of Conduct. If these rules are violated, we accept the responsibility for the behavior and will arrange, at our own expense, for the transportation of the child if he/she is dismissed from the event.

Parent's/Guardian's Signature: _____

Youth Signature: _____ Date: _____

