

**Shawnigan Alliance Church Registration Form YOUTH  
Sept 2018 - Sept 2019**

Form updated September 6, 2018

A registration form is to be filled out by parents or guardians of **ALL children in All programs** at Shawnigan Alliance Church.

Name of Youth: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Current Age \_\_\_\_\_  
Name of parent(s) or guardian(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone number: \_\_\_\_\_ Cell \_\_\_\_\_  
Work number: \_\_\_\_\_  
Email: \_\_\_\_\_  
Health card Number: \_\_\_\_\_

**Allergies: ACUTE MEDICAL ISSUES SUCH AS SEVERE ALLERGIES OR THE PRESENCE OF MEDICATIONS MUST BE BROUGHT TO THE ATTENTION OF THE YOUTH LEADER AND WRITTEN HERE**

Does your child have any physical, emotional, mental, behavioural concerns or limitations that our staff should be aware of?            Y                            N

If yes, please explain \_\_\_\_\_

Does your child keep medication with him/her?            Y                            N

If Yes, please list medications: \_\_\_\_\_

Is there anything else that you feel our leaders should know?

In case of an emergency, you would like us to contact

Name: \_\_\_\_\_ phone: \_\_\_\_\_

Relationship to student \_\_\_\_\_

**This is a 2 page document - Please see the back and sign if agreed**

**Parent/Guardian Agreement:**

**Release and Permission:**

**“We the undersigned parents/guardians, grant permission for the participant to take part in SAC youth sponsored events for the year of 2018/2019. We represent to you that the participant is physically and mentally able to participate in activities. We understand that all information collected will remain confidential and is being gathered for the purpose of serving our student(s) while in the care of SAC. If we as parents/guardians are not present at a specific activity in which the participant is to participate, so as to be consulted in case of necessity, you are authorised on our behalf to arrange for such medical and hospital treatment as you may deem advisable for the health and well-being of the participant. The undersigned participant has insurance listed above. We as parents/guardians recognise that this is a Christian program and will have a spiritual emphasis.**

**We as parents/guardians recognize that weekly meetings and events include indoor and outdoor games and physical activities that may include inherent risk and we give our child permission to participate. We understand that this may include off-site events, including but not limited to events in Victoria, Duncan, Lake Cowichan and Nanaimo, which will involve vehicle travel and all inherent risk associated with the activities. We hereby authorise transportation in leader or volunteer vehicles throughout the year and we authorise permission for all events here.**

**We as parents/guardians authorize transportation by a sub-contacted transportation company when deemed necessary. Further, we as parents/guardians hereby grant full permission for SAC to record any or all participation in these events via photos, video, television, radio, or any other media for purposes of advertising and promotion without any reimbursement of any kind due to us or the released person, or the need to pay any fee. I/We as parents/guardians give permission for the reasonable use of pictures, containing my child for promotional materials and SAC website.**

**Social networking** by our youth through text messaging, Facebook and Twitter is the way youth communicate with each other on a routine basis. Plan to Protect 1 and Shawnigan Alliance Church acknowledge this reality but are still cognizant of protecting kids. Please be advised that Youth Leaders will not initiate contact with youth, other than advising on upcoming events and activities throughout the program year.

**Note: Shawnigan Alliance Church is not responsible for children who are allowed to walk home, those who drive themselves home, or whose parents have allowed them to be picked up by people other than parents after events.**

“I have read and understand the information above and here give my signature of agreement to cover all student activities for the year.” (September 2018 to September 2019)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

1.Shawnigan Alliance Church is committed to the safety and protection of children. Therefore; "Plan to Protect is a manual of procedures and policies adopted for the purpose of protecting children and leaders at Shawnigan Alliance Church. Its use is mandated by our National and District offices, in keeping with our District insurance and legal counsel." For information about Plan to Protect please contact: Pastor Trevor Dunham [trevor@shawniganalliance.org](mailto:trevor@shawniganalliance.org)