



**Youth Ministry CRIME Forms**

(Covenant, Release, Information, Medical, Emergency)

**Information**

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ School/Grade: \_\_\_\_\_  
Participant Email: \_\_\_\_\_ Participant Cell: \_\_\_\_\_  
Caregiver #1 Name: \_\_\_\_\_ C#1 Cell: \_\_\_\_\_  
Caregiver #2 Name: \_\_\_\_\_ C#2 Cell: \_\_\_\_\_  
C#1 Email: \_\_\_\_\_ C#2 Email: \_\_\_\_\_

**Emergency**

Emergency Contact: \_\_\_\_\_ Emer. Phone: \_\_\_\_\_  
Family Physician: \_\_\_\_\_ Office Phone: \_\_\_\_\_  
Med. Insurance Company: \_\_\_\_\_ Insurance Phone: \_\_\_\_\_  
Group #: \_\_\_\_\_ Policy #: \_\_\_\_\_

**Medical History**

Allergies & Reactions: \_\_\_\_\_  
\_\_\_\_\_  
Medication & Instructions: \_\_\_\_\_  
\_\_\_\_\_  
Medical Restrictions: \_\_\_\_\_  
\_\_\_\_\_  
Additional Physical/Emotional/Dietary Concerns: \_\_\_\_\_  
\_\_\_\_\_

Please cross out any medications that should **NOT** be given to the participant (your child).

- |  |  |
|--|--|
| Acetaminophen (Tylenol)                  | Ibuprofen (Advil, Motrin)                        |
| Diphenhydramine antihistamine (Benadryl) | Pseudoephedrine decongestant (Sudafed)           |
| Guaifenesin cough syrup (Robitussin)     | Dextromethorphan cough syrup (Robitussin DM)     |
| Sore throat spray (Chloraceptic)         | Generic cough drops                              |
| Antibiotic cream                         | Benadryl cream                                   |
| Calamine lotion                          | Cortaid  |
| Laxatives for constipation (Ex-Lax)      | Bismuth subsalicylate (Kaopectate, Pepto-Bismol) |
| Tums/Milk of Magnesia/Immodium           | Latex bandages                                   |

Any other over-the-counter medicines **NOT** to give:



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### Release of Permission & Liability

- I understand that safety is of utmost concern to Providence Presbyterian Church and its Youth Ministry staff and advisors. I also understand that perfect safety cannot be assured in our world or at ministry events.
- I give permission to for my child (or myself) to participate in all activities, retreats and events of the Providence Youth Ministry. I acknowledge further that s/he (or myself, as an adult participant) is in good health, under no activity restrictions that are not discussed above.
- I give permission for her/him (and myself) to travel to and from ministry events with Providence staff and advisors.
- Providence Presbyterian Church may use photos of my child at ministry events for church purposes.
- I agree to hold harmless Providence Presbyterian Church, its staff and advisors, from any and all liability for injury, damage or loss of life from participating in ministry events.
- In the event of sickness or injury at ministry events, I give permission to Providence staff and advisors to offer necessary medical attention for my child, whether that be band aids or CPR. In the event of a medical emergency needing hospital attention, I authorize the doctor to perform any treatment and emergency procedures, in consultation with the Providence staff and advisors.
- I understand that a child's behavior can significantly disrupt ministry events, and that staff and advisors may need to minister to the behavioral issues of my child. If my child's behavior at a ministry event is unacceptable, I assume responsibility for returning them home immediately.
- Should there be any change of family, emergency or medical information, I promise to update Providence Presbyterian Church.

Caregiver: \_\_\_\_\_ Date: \_\_\_\_\_

### Covenant

- As part of a caring community, I will include and support all people in Providence Presbyterian Youth Ministries.
- I will participate in positive ways, challenging myself individually, rejoicing in group success, and comforting others in our mutual weaknesses.
- I will not behave in any way that disrespects or threatens the value, spirit or peace of myself, others or the group. I will not use violence, coarse language or cruelty.
- I will follow directions and not break the rules established by the leaders.
- I will strive to grow in my relationship with God.

Participant: \_\_\_\_\_ Date: \_\_\_\_\_

- I will plan physically and emotionally safe activities, engage in safe practices (in ministry and travel), and prepare advisors to serve safely.
- I will do everything in my power to support, minister to and love the young people of this church.
- I will strive to grow in my relationship with God.

Youth Pastor: \_\_\_\_\_ Date: \_\_\_\_\_