

Youthway Registration Form

(Church/organisation): **Gateway Baptist Church Launceston**

Name of Program/Ministry/Event: **Youthway**

Participant's details			
First name		Last name	
Date of Birth		Year Level	
Address			
Email Address			
Phone Number			
Important information	Please list any information that we may need to know about e.g. medical, allergies, special needs etc.		
Parent/Guardian details			
Parent or Guardian Full name(s)			
Email address			
Contact numbers	(H)	(M)	

I give permission for my son/daughter _____ to attend the Youthway at Gateway Baptist Church.

PHOTOGRAPHY/VIDEOGRAPHY WAIVER: I understand that my son/daughter may be photographed or recorded on video during the course of church programs and/or events. By initialling below I provide consent for their image to be used in either print, electronic, or video form for the promotional purpose of future church based activities.

Emergency contacts:

1. Name: _____ R'ship to Participant: _____ Phone: _____

2. Name: _____ R'ship to Participant: _____ Phone: _____

Travel to and from Youthway: My son/daughter will be Signed in out by guardian/ Dropped at street/ walk / Other please specify (cross off all that do not apply)

If different to Emergency Contact details, please give details (name, address and phone number) of other persons who you authorise to collect your child/ren in your absence, while in the care of the above-named group:

Same as Emergency Contact Details: YES/NO (please circle)

1. Name: _____ R'ship to Participant: _____ Phone: _____

2. Name: _____ R'ship to Participant: _____ Phone: _____

I release Gateway Baptist Church employees, leaders and representatives from any liability of unintended or unexpected accidents which might occur during participation in the program/events.

In the event of accident or illness to my son/daughter I give permission to obtain medical assistance or treatment as may be necessary and to engage any medical professionals (including ambulance and hospital) and I agree to pay for those expenses incurred.

I understand all effort has been given for leaders and volunteers to be trained in to provide a safe and welcoming environment at (church/Organisation).

Signed: _____ Date: _____

Optional Driving Declaration:

I, _____, give permission for my child/ren who attend the Youth Ministry activities at Gateway to be **driven** to and from youth activities by Youth Leaders that have been approved by the Session of Gateway Baptist Church.

I am aware that the Youth Leaders are bound by the Safe Church Policy and Code of Conduct and that they are committed to providing a Safe Church environment at all times in the youth ministry.

Therefore, I also acknowledge that from time to time, depending on the circumstances, my child/ren will be alone in the car with one of the authorised Youth Leaders for all or part of the journey. I give permission for this to occur within the guidelines established by the Safe Church Unit.

Signed: _____ Date: _____