UMARMY

Senior High Mission Trip

June 17-23, 2018

\$250

Turn in Registration form with \$50 deposit



PARTICIPANT INFORMATION				
NAME	PREFERED NAME		E-MAIL ADDRESS	
HOME PHONE	CELL #		GENDER: M F	
ADDRESS (INCLUDE CITY, STATE, ZIP)				
SCHOOL		GRADE 9	10 11 12 ADULT	
ARE YOU A MEMBER OF NHUMC? YES NO		IF NO, WHERE DO YOU ATTEND?		
IF A GUEST, WHO ARE YOU A GUEST OF?		ADULT T-SHIRT SI	ZE S M L XL XXL	

PARENT/GUARDIAN INFORMATION				
PARENT/GUARDIAN NAME	CELL #			
E-MAIL ADDRESS	WORK #			
EMERGENCY CONTACT	EMERGENCY PHONE			

Health and Medication						
FOOD ALLEGRIES	DRU	G ALLERGIES	OTHER ALLERGIES			
CURRENT HEALTH CONCERNS						
Bring enough medication to last the entire duration of the event. Over the counter and prescription medicine (including inhalers) <u>must</u> be in their original packaging/bottle. All medication should be placed in a clear Ziploc bag clearly marked with the child's name.						
MED NAME	DOSAGE	TIME TAKEN	REASON FOR TAKING			
1						
2						
3						
4						

Covenant of Conduct

This covenant is an agreement that is "binding" and is based on a partnership of love. We will do our best to live after the example of Christ as we uphold our partnership in intimate love. Ultimately, our goal is to glorify God and make disciples!

I understand the need for me to be responsible and follow these specific guidelines. I realize my actions may affect the safety and the community of this event.

- 1) I understand I must respect others, property and myself through my words and actions.
- 2) I understand that I must limit my public display of affection (PDA) if I'm not married.
- 3) I understand that I need to leave cell phones, mp3 players & portable game systems at home or packed safely away (even though I might die without them).
- 4) I understand that I need to stay with my group even though there will be other people to hang with and other places I want to hang out. I understand this includes staying out of opposite sex sleeping areas.
- 5) I understand that I'm not allowed to possess or use tobacco, alcohol, or any type of drugs.

Consequences:

Guidelines 1-4 These actions will be confronted at once and if repeated, will result in being sent home at your family's expense.

Guideline 5 These actions will result in being sent home at your family's expense.

I will follow the above guidelines and adult leadership. I understand the consequences if I choose not to follow them.

Student's signature

I/We understand all of the guidelines and safety procedures and the potential consequences.

Parent's signature



Scan to pay

Please complete both sides