



## 8<sup>th</sup> grade – High School Cincinnati Mission Trip Sunday, June 9 – Friday, June 14

Registration forms and \$150 deposit need to be turned in by Mar. 27th  
There are only 50 spots available for current 8<sup>th</sup> graders going into 9<sup>th</sup> grade – 12 graders.  
1st come -1st serve. Preference is given to students who attend a LUG group.

**Serve!** This summer our students are going to be the hands and feet of Christ in Cincinnati, Ohio! We hope you will come with us as we experience what it means to “go” and share the love of Christ with this lost and broken world.

**Why Cincinnati?** When deciding to pick where we should go for our student trip, we decided Cincinnati. We wanted to provide a mission trip that is in a little larger of a setting but also be a great & safe place for our students to be the hands and feet of Jesus.

**What we’ll do there.** We are working through a youth mission ministry called YouthWorks. Our goal in partnering with local service organizations and programs is to address the very basic needs of residents. Students may serve at places like: Children’s Programs, Elderly Centers, Soup Kitchens/Homeless Shelters and Thrift Stores.

**Experiencing the culture.** All week, we’ll stay in a safe church in the city. Each evening we’ll venture out to provide an exposure to community and culture. A list of evening/cultural activities that have been done in the past include: attend a community cookout; take part in a community educational experience; spend the evening at a local park.

**How we’ll get there.** We’ll take church vans and leave at 4:00am Sunday morning, June 9 and drive through the day to Cincinnati. We will arrive in Cincinnati around 6:00pm where we will be staying. We will leave Cincinnati the morning of Friday, June 14 and will arrive home to Sioux City on Friday evening, June 14 at 11:00pm.

**Cost = \$285.** This includes transportation, housing, food during the mission trip, materials and activities in Cincinnati. Your \$150 deposit will go towards this total. Cost **does not** include on-the-road travel meals. Plan to bring enough cash for 6 meals at about \$6 apiece (about \$30-\$45).

**To secure a spot on this trip!** Fill out and turn in the registration forms and a \$150 non-refundable deposit into the Sunnybrook office by March 27, or bring on Wednesday night and deposit in our trip box. (Make sure to note if you are using money from student accounts or “cookie dough”.)

**Scholarship Money.** We also have partial scholarship money to help you get the funds needed. Call David Wilch at 712-276-7915 ext. 28 if you need scholarship assistance.

# Sunnybrook registration form for Youthworks Cincinnati 2013

- ✓ Include this registration form in an envelope along with other Cincinnati forms/payments NO LATER than March 27, 2013.
- ✓ Please staple a copy of your family insurance card to this form.

Student/Participant Name: \_\_\_\_\_ Student Cell: \_\_\_\_\_  
School: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Grade from '12-'13: 8 9 10 11 12  
Do you attend Sunnybrook's youth group? Y N If not, who do you want to come with on this trip? \_\_\_\_\_  
Parent/guardian name: \_\_\_\_\_  
Parent e-mail: \_\_\_\_\_ @ \_\_\_\_\_ Parent Cell: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Insurance Company: \_\_\_\_\_ Group #: \_\_\_\_\_

1. Are you (student) pregnant at this time? Y N
2. List any allergies and their effects along with medications you take for them (insect bites, med allergies, food allergies, etc.)
3. List any medical/health conditions (diabetes, epilepsy, etc) and the medications that you take to control their effects.
4. List all recent injuries, broken bones, illnesses or operations, beginning with most recent (list month and year)
5. List any emotional/behavioral considerations and their effects on you (fear of heights, insects, etc.)

## TO BE READ & SIGNED BY PARENT/GUARDIAN

As parent/legal guardian, I hereby give permission for my child to participate in "Youthworks Cincinnati 2013" June 9-14, 2013. I understand that the Sunnybrook organizers do not carry medical and hospitalization coverage for my child. I understand that my personal medical and hospitalization insurance policies will provide primary coverage. I further understand that in the event my child requires medical or dental treatment while on this trip, reasonable efforts will be made to contact me. However, if I cannot be reached I hereby give consent and permission to Sunnybrook's youth director or any adult organizer or volunteer acting on behalf of Sunnybrook and "Youthworks Cincinnati" with respect to the activity, as agent for me, to administer or dispense: over the counter medications for the relief of minor aches, abrasions, cuts, or irritations, and consent to any x-ray, examination, injections, anesthesia, medical, dental, or surgical diagnosis and treatment and hospital care and treatment advised and supervised by a licensed physician, surgeon, or dentist (as appropriate) licensed to lawfully practice in the State where the services are rendered; either as an outpatient or by any hospital. To the best of my knowledge I have listed, above, all of my child's known allergies, medications and prescriptions to be taken, medical conditions and other pertinent information.

I agree to pay any and all expenses for my child being sent home, or I'll come get him/her myself, if such disciplinary action is deemed necessary by Sunnybrook's youth director or any adult organizer or volunteer acting on behalf of Sunnybrook. I agree that if my child shares any information about physical or emotional behavior or any condition that, in the opinion of Sunnybrook leadership, may be harmful to them, I, as a parent or legal guardian, may be informed.

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

## TO BE READ & SIGNED BY STUDENT

I agree to follow the behavior rules and obey and respect the adult chaperones and other students while I'm on this trip. I also agree that if I share any information about me participating in behavior that is hurting myself or others, or if others are hurting me physically or emotionally, my parents/guardians may be informed (as long as that doesn't put me in any further danger at home).

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**2013 YouthWorks Participant Release Form**  
(To be filled out by both Students and Adult Leaders)

**Bring original form  
and 2 copies to site.**

Name of Participant (please print) \_\_\_\_\_

Sponsored by (Church or Organization Name) Sunnybrook Community Church

Name of Site Cincinnati, Ohio Week Attending June 9-14, 2013

**Liability Release Agreement**

I/we understand that there are inherent risks involved in any mission trip, and I/we hereby release YouthWorks!, Inc., its staff and volunteer workers from any and all liability due to any injury, loss or damage to person or property that may occur during the course of my/our involvement with the YouthWorks organization. I understand that during the week participants may be photographed or video taped for promotional materials.

**Transport Home Agreement for Students**

I/we, the undersigned, are the parents having legal custody or the legal guardians of the above named participant, a minor, have given our consent for him/her to attend a mission trip operated by YouthWorks, or are of legal consenting age myself. I/we understand that a member of the YouthWorks staff or the lead adult of our group may need to send a participant home as a result of illness or discipline problem. I/we understand if the participant named above is dismissed from the mission site, I/he/she will be transported home at my/our expense. YouthWorks or the lead adult of our group will attempt to contact the parent or guardian to arrange such transportation.

**Medical Release Agreement**

I/we the undersigned, are the parents having legal custody, or the legal guardians of the above named participant, a minor, have given our consent for him/her to attend a mission trip operated by YouthWorks!, Inc., or are of legal consenting age myself. In the event that I/he/she is injured while attending the trip and requires the attention of a doctor, I/we consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is called for, which a physician and/or hospital personnel refuses to administer without my/our consent, I/we hereby authorize David Wilch, the lead adult of our group, or a member of the YouthWorks staff to give such consent for us if I/we cannot be reached by telephone at one of the numbers listed below, or because of an emergency, there is not time or opportunity to make a telephone call. In the event it becomes necessary for that person to give consent for us, I/we agree to hold such person free and harmless of any claims, demands or suits for damages arising from the giving of such consent so long as the treatment is administered by or under the supervision of a licensed physician. I/we also acknowledge that I/we will be ultimately responsible for the cost of any medical care should the cost of that care not be reimbursed by the health insurance carrier. Further, I/we affirm that the health insurance information provided below is accurate at this date and will, to the best of my/our knowledge, still be in force for the participant named above at the time of the mission trip.

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Home Address \_\_\_\_\_ Phone \_\_\_\_\_

Date of Last Tetanus Shot \_\_\_\_\_ Known Allergies \_\_\_\_\_

Date of Last Tuberculosis Test\* (if applicable) \_\_\_\_\_ Positive or Negative \_\_\_\_\_

Current Medications or Health Conditions \_\_\_\_\_

\_\_\_\_\_  
Please attach a copy of your insurance card to this form.

**2013 YouthWorks Participant Release Form**  
(To be filled out by both Students and Adult Leaders)

**Bring original form  
and 2 copies to site.**

**Emergency Contact Information**

1) \_\_\_\_\_  
Relationship to Participant \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

2) \_\_\_\_\_  
Relationship to Participant \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

**Insurance Information**

Name of health insurance company \_\_\_\_\_  
Health insurance policy number \_\_\_\_\_  
Phone/address of health insurance company \_\_\_\_\_  
Name of policy holder \_\_\_\_\_  
Policy holder's phone number \_\_\_\_\_

\*Participants without health insurance are still able to join, understanding the risks and personal liability to any and all medical payments.

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**Participation on a YouthWorks trip is contingent upon compliance with all the policies stated on the previous page.**

Liability Release  
Transport Home  
Medical Release

Student Participant (Print) \_\_\_\_\_  
(Signature) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (1) (Print) \_\_\_\_\_  
(Signature) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (2) (Print) \_\_\_\_\_  
(Signature) \_\_\_\_\_ Date \_\_\_\_\_

---- OR ----

Adult Leader Participant (Print) \_\_\_\_\_  
(Signature) \_\_\_\_\_ Date \_\_\_\_\_



**Bring Signed  
Form to Site**

# 2013 YOUTH COVENANT

## 2013 YOUTH COVENANT

***You're about to meet some new people in a new place and hopefully learn some pretty awesome stuff!*** But before you do, there are a couple things we want everybody to agree on, so your trip will be the best it can be. We've thought carefully about what's important for everyone to see eye-to-eye on and listed those things below. These expectations will help to make this experience meaningful, fun and safe for everyone – and by "everyone," we mean YouthWorks staff, community members, adult leaders, other students and, especially, you!

Please read this covenant carefully so you understand YouthWorks policies. By signing at the bottom, you'll be agreeing to respect the community you are serving and commit to being a team player in your group.

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>★ I agree to look for ways to serve others with a joyful attitude, so I can help people like Jesus did. I understand that I am on the trip to serve God, help a community, build new relationships and learn new things. I agree to come prepared to do just that!</li> </ul>   | <ul style="list-style-type: none"> <li>★ I want to respect the people around me, so I agree to follow the YouthWorks Clothing Policy. The way I dress can affect my ministry. I will respect my group, the community and myself by dressing modestly.</li> </ul>  |
| <ul style="list-style-type: none"> <li>★ I am aware that my actions affect people other than just me. I agree to obey all local laws and ordinances pertaining to use of drugs and alcohol by minors. I will not bring or use any weapon or illegal substance during my mission trip week.</li> </ul>  | <ul style="list-style-type: none"> <li>★ I agree that this mission week is a group experience. I'll be in different group settings all week. Because of this, I will do my best to build community, create relationships, be welcoming and include others. I agree to treat everyone – leaders, staff, other students and community members – with the utmost respect.</li> </ul>   |
| <ul style="list-style-type: none"> <li>★ I want to stay focused on the people and experiences at the mission site. Out of respect for the policies of YouthWorks' ministry and housing partners, I will consider leaving my cell phone at home. If I choose to bring my cell phone, I understand that I will only be allowed to use it during approved times, and I will risk theft or loss. I understand that my parents will be given instructions on how to contact my adult leaders in case I need to be reached.</li> </ul> | <ul style="list-style-type: none"> <li>★ I realize that there are adults in my life and on the trip who care about my well-being. Plus, I want to be safe! So, I agree to stay within the designated YouthWorks boundaries, follow rules at ministry sites, stay in groups of three or more, respect gender-specific areas (sleeping rooms, restrooms and showers), and refrain from using my cell phone in these areas due to privacy concerns.</li> </ul> |
| <ul style="list-style-type: none"> <li>★ Because I want nothing to distract me in this week of serving others, I will consider leaving electronic devices at home. This includes iPods, mp3 players, electronic games, laptops, portable DVD players or any other devices that could cut me off from interacting with those around me or prevent me from fully engaging in activities. I understand that I will not be able to use these items during the week and that I risk theft or loss by bringing them.</li> </ul>        | <ul style="list-style-type: none"> <li>★ It matters how I treat people's things, so I agree that I will respect the property of all participants, the community members and the housing site where we stay. My actions will show my love for Jesus and others. I will keep in mind the purpose of the trip and my job of showing Jesus to the community.</li> </ul>   |

***I agree to follow all the above expectations because I want to be safe, love others and represent Jesus well at all times.***

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date