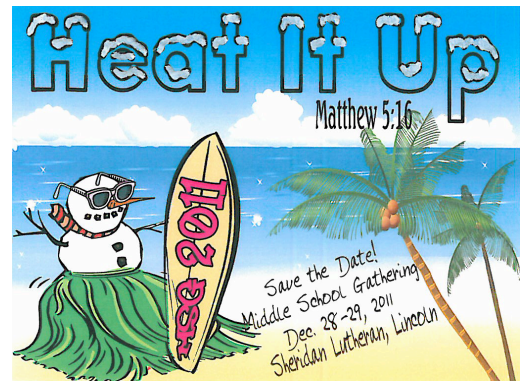


**Middle School Gathering 2011  
Youth and Adult Registration Form  
Grades 6-8**



**Participants:** *This form is to assist youth ministry leaders in collecting information that will be used to complete the online registration for the Middle School Gathering. Please print, complete and give this form to your youth ministry leader. Youth ministry leaders: Please bring this form with you to Lincoln for use in case of emergencies.*

Name \_\_\_\_\_

Congregation/City \_\_\_\_\_

Youth \_\_\_\_\_ (If youth: Grade \_\_\_\_\_) Adult \_\_\_\_\_

Male \_\_\_ Female \_\_\_ T-Shirt Size (adult sizes only) S M L XL XXL(+\$2)

\_\_\_\_\_ I am a pastor or youth director (therefore my registration is FREE)

**Middle School Gathering Covenant**

I understand that while at the Middle School Gathering, I am part of a Christian community, representing my church and the entire Body of Christ. Therefore, for my own safety and the care of others, I promise to abide by the following rules of conduct:

I intend to participate in all planned activities.

I will respect others around me by:

Using appropriate language

Keeping my body to myself (including displays of affection)

Being thoughtful of the feelings of those around me

I will respect and appreciate the different gifts, cultures, and perspectives encountered in this experience by:

Observing others' right to express their opinions

Listening

Being considerate of others who may not be part of our group

I will respect the property and rights of others.

I will respect the leadership of those in charge by:

Listening carefully to, and following all directions, instructions, and rules

Being honest

I will not abuse my body with tobacco, drugs, or alcohol at any time or have possession of these substances.

**OVER**

Should I break this covenant, I agree to accept the consequences determined by the leadership. If it is determined that my behavior warrants my leaving this event, travel home will be at my own expense, or that of my parents or guardians.

Name of Participant \_\_\_\_\_

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

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

Date \_\_\_\_\_

**Medical/Photo Release**

**Participant Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**If minor, Parent/Guardian Name:** \_\_\_\_\_ **Emergency #** \_\_\_\_\_

**Address (Street, City, State, ZIP):** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Insurance Carrier** \_\_\_\_\_ **Policy Number** \_\_\_\_\_

**Name of Insured** \_\_\_\_\_

**I authorize the Nebraska Synod/Middle School Gathering team to obtain medical treatment for the named minor/adult should it be deemed necessary. I assume responsibility for all expenses incurred for this treatment and related transport.**

**I/We release the Nebraska Synod, Middle School Gathering and its representatives from liability in the event of injury, accidental death or illness of the minor/adult named. We also understand that these organizations are not responsible for loss of or damage to any personal items the named participant chooses to bring to the event. I also give event planners permission to use any photographs of my child/me taken at this event in future promotion of the Nebraska Synod Middle School Gathering or church related youth programming.**

**Participant Signature:** \_\_\_\_\_

**If Minor, Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_