

EMERGENCY CONTACT AND MEDICAL INFORMATION

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Known allergies:

Current Medications:

Insurance Card Information:

PALM VALLEY CHURCH MISSION AGREEMENT

PVC Mission Participant Agreement

In order to participate with Palm Valley Church missions, each prospective applicant must prayerfully consider and accept the following statements.

- Realizing that I am a minister of Jesus Christ and a representative of Palm Valley Church, my words and actions must be above reproach. I will not participate in any behavior that is questionable in the culture of the host country or city.
- Realizing Christianity has many faces throughout the world, I will respect and honor the culture of the host country, city and I will support the methods, insights, and instructions of the hosts.
- Realizing that as a minister of Jesus Christ I am first a servant, I will maintain a servant attitude with my teammates and mission hosts, and I will submit to the leadership of the mission team leader.
- Realizing that I must be prepared physically, emotionally, and also spiritually, I agree to participate fully in the mission preparation process, by attending each trip equipping and leadership development session, maintaining a consistent prayer life, having a consistent daily quiet time with the Lord, and reading any books asked of me by the group leader.

LIABILITY, MEDICAL AND MEDIA RELEASE

Liability Release

My signature on this form confirms that I hereby release and hold harmless Palm Valley Church (including its agents, employees, representatives, and staff) from all liability for any medical or health-related problems, personal injury or property damage that I may suffer or incur while traveling or serving on a church sponsored mission trip or ministry event.

For my own safety and well-being, I agree to abide by all rules and regulations established by the Palm Valley Church representative who is in position of authority during this time of travel or services. I also accept responsibility for my personal possessions and property during the time of travel or service.

Medical Release

If, during this time of travel or service, I am in need of medical or other health related treatment, but am unable to seek assistance for myself or make decisions for myself, then I give my permission, authority and power of attorney to the Palm Valley Church representative to seek appropriate care and treatment on my behalf.

I further agree that any claim for medical or health related benefits, personal injury or property damages will be limited to and asserted against insurance companies and/or third persons, parties or entities other than Palm Valley Church.

Media Release

In consideration of my participation with Palm Valley Church, I hereby irrevocably consent to and authorize the use, publication, transmission and reproduction of my name, likeness and image, on any and all media worldwide, by Palm Valley Church or anyone authorized by or acting on behalf of Palm Valley Church, for promotions, fundraising, advertising, marketing and/or public relation purposes.

I have read this Participation/Release agreement and understand its terms. I further represent that I am at least 18 years of age and am not a minor in my State of residence or, if I am a minor in such State, that my parent or my legal guardian have signed this form in the "Consent" section below, acknowledging this Release and accepting its terms on my behalf. A photocopy of this Release shall be as valid and may be accepted as the original.

Signature of each PVC Mission participant 18 years and older:

Participant Signature: _____ Date: _____

Print Name: _____

Participant Signature: _____ Date: _____

Print Name: _____

Participant Signature: _____ Date: _____

Print Name: _____

Parent/Legal Guardian Consent:

Signature: _____ Date: _____

Print Name: _____