Youth Member Permission Form

Cost for attending annual conference are the responsibility of the local church, district, agency or conference. The Commission on the Annual Conference Session has hired chaperones who will act in a supervisory role for youth at Annual Conference. Youth members to Annual Conference will be required to regularly check-in with these chaperones, and the chaperones will be the primary point person should problems or emergencies arise. These chaperones are certified under the Michigan Conference Protection Policy.



THIS FORM MUST BE SUBMITTED by Annual Conference

This form is required for every youth member (12 - 18 years old) participating in the 2019 Michigan Annual Conference at Grand Traverse Resort and Spa. Please bring the forms with you to Conference or send them to:

Bridget Nelson

3113 Marion Dr.

Diatriate

Royal Oak, MI 48067

bnelson@michiganumc.org

	District
_ocal Church:	
Address:	
City:	State:ZIP:
E-mail:	Telephone:
 I am coming to Annual Conference □ Equalization Member □ Representative of a Local Church (p 	please list church and pastor's name on the line below
Responsible Adult Name:	
Position	

Nomai

YOUTH MEMBER COVENANT STATEMENT, PERMISSION, AND MEDICAL AUTHORIZATION

2019 Michigan Annual Conference

May 29 - June 2, 2019 • Grand Traverse Resort and Spa • Acme, Michigan

I. COVENANT STATEMENT

(To be signed by the Youth Member)

By signing this statement and attending the conference, I agree to abide by the following covenant:

- 1. Complete and turn in all required forms.
- 2. Attend and participate in all sessions of the Annual Conference including the Youth/Young Adult orientation on the first night of your respective Annual Conference on the Youth Floor.
- 3. Remain on the campus of Grand Traverse for the duration of Annual Conference.
- 4. Check in every night with your Youth Floor RA at 10 PM and remain in the hotel room until breakfast. Only registered members of Annual Conference are allowed in this area. Be considerate of other people staying on the hotel floor.
- 5. Meet with the pastor of the youth's church once during Annual Conference. I understand that participating in conference is contingent upon keeping this covenant and being a responsible member of annual conference.

Youth Member Signature	Da	ate
	HORIZATION STATEMENT	•
(To be co	mpleted by parent or guardiar	n)
Having read the description of the Michigan An support, I hereby give permission for legal custody, to attend the 2019 Michigan Ann	(Youth Mem	ber's name), a minor child for who I have
In addition, I hereby authorize the Michigan amedical care and surgical treatment as well as is at the Michigan Annual Conference in Acme,	to administer routine, n	•
I want the supervising adults and ministry leade or information about this child that might affect		<u> </u>
III. IMPO	ORTANT INFORMATION	
In case of emergency, I may be reached by ph	none:	
During the day at	In the evening at _	
Our health insurance provider is:		
Our policy number is:		
Our group number is:		
Please list any pertinent medical information:	:	
Signature		Date
(PARENT OR GUARDIAN)		
2019 Michigan Area Annual Conference	page 2 of 2	Youth Member Permission Form