STUDENT
Registration Form

Parent or Guardian: Complete this form, sign it, and return it with payment (payable to your church) to the CHIC contact at your church. Please print legibly.

STUDENT FIRST NAME* _____ LAST NAME _____
*note: as you'd like it to appear on your name tag

GENDER ☐ Female ☐ Male DATE OF BIRTH _____ / _____ / _____
MONTH DAY YEAR

GRADE in 2017-2018 school year ☐ 9 ☐ 10 ☐ 11 ☐ 12
*note: students must also be 15 years of age by December 31, 2017 OR be 14 years old AND complete grade 9 in the 2017-2018 school year.

CURRENT ADDRESS _____ HOME PHONE _____

CITY _____ STATE/PROV _____ ZIP _____

MOBILE PHONE _____ EMAIL _____

ETHNICITY (optional) ☐ Caucasian ☐ African-American ☐ Hispanic or Latino/a ☐ Asian-American
☐ First Nation/Native American ☐ Native Alaskan ☐ Indicate: _____

PARENT/GUARDIAN CONTACT _____ HOME PHONE _____ MOBILE PHONE _____

MEDICAL INSURANCE*

_____
INSURANCE COMPANY NAME OR CANADIAN HEALTHCARE NUMBER

_____
INSURANCE COMPANY ADDRESS

_____
CITY STATE/PROV ZIP

_____
PHONE

_____
NAME OF INSURED

_____
POLICY #

_____
PHYSICIAN PHONE

*In addition to your own insurance, accident insurance will be provided during the week of CHIC for students. Canadian residents should purchase travel insurance.

DENTAL INSURANCE (IF DIFFERENT THAN MEDICAL INSURANCE LISTED ABOVE)

_____
INSURANCE COMPANY NAME

_____
INSURANCE COMPANY ADDRESS

_____
CITY STATE/PROV ZIP

_____
PHONE

_____
NAME OF INSURED

_____
POLICY #

MEDICAL INFORMATION

1. Is your son/daughter currently under the care of a physician for a medical problem? ☐ Yes ☐ No

If yes, please explain: _____

_____

2. Is your son/daughter currently taking medication prescribed by a physician? ☐ Yes ☐ No

If yes, please list each medication and indicate whether or not it needs refrigeration:

_____ ☐ Requires Refrigeration

_____ ☐ Requires Refrigeration

_____ ☐ Requires Refrigeration

3. Please list any over-the-counter medications you do not wish dispensed to your child for treatment of minor ailments or injuries.

_____

_____

4. Does your son/daughter have any of the following medical conditions?

If yes, please explain any details underneath the condition.

- Chronic health problems? ☐ Yes ☐ No

- Allergies (e.g., food, bee stings, medications)? ☐ Yes ☐ No

- Program limitations (e.g., contact sports)? ☐ Yes ☐ No

- List any other information about your son/daughter that an attending physician needs to be aware of.

5. Date of Last Tetanus _____/ _____ / _____

Date of Last MMR _____/ _____ / _____

I authorize the above information:

_____
PARENT OR GUARDIAN SIGNATURE DATE

_____
PRINT PARENT OR GUARDIAN NAME

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PARENTAL CONSENT
& Medical Release Form*

(Attendee's name) _____ will be attending CHIC, at the University of Tennessee. As parent(s) or legal guardian(s) we (I) are confident that every measure will be taken to protect the safety of all participants. So on behalf of said attendee we (I) hereby release, forever discharge, and agree to hold harmless, the Evangelical Covenant Church, The University of Tennessee, the Rafting Company, Mountain Challenge, and any other contracted vendor for the CHIC event, and the owners, directors, officers, agents, and employees and volunteers thereof, from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the participant that occur while said attendee is participating in CHIC.

Furthermore, we (I) hereby assume all risk of personal injury, sickness, death, property damage and expense as a result of participation in recreation and excursion activities involved therein. Further, authorization and permission is hereby given to CHIC staff to furnish any necessary medical care, transportation, food, and lodging during CHIC.

We (I) are the parent(s) or legal guardian(s) of this attendee and hereby grant permission for him/her to participate fully in CHIC, and hereby give CHIC staff permission to take him/her to a doctor or hospital and authorize medical treatment. We (I) will assume all responsibility for all medical bills. I understand that if medical treatment is required we (I) will be contacted as soon as possible.

Should it be necessary for attendee to be sent home for medical reasons, disciplinary reasons, or otherwise, we (I) hereby assume all related costs.

We (I) hereby grant permission for the Evangelical Covenant Church to publish images of activities and of this attendee for the purpose of promoting CHIC and the Evangelical Covenant Church through communications channels of the Evangelical Covenant Church. We (I) grant this permission freely without reservation.

We (I) understand that there are excursions and recreation opportunities at CHIC. We (I), the parent(s) or legal guardian(s), fully understand and acknowledge that (a) outdoor recreational activities have: inherent risks, dangers and hazards that exist in use of whitewater rafting equipment, kayaking equipment, paintball equipment, mountain bikes, hiking trails, and horses, participation in horseback riding, whitewater rafting, kayaking, paintball, mountain biking, and other activities; (b) participation in such activities and/or use of such equipment may result in death, injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the participants, the negligence of others, accidents, breaches of contract, an unpredictable or unexpected reaction from an animal, and the forces of nature or other causes; and (d) by participation in these activities and/or use of equipment, we (I) hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, directors, officers, agents, and employees and volunteers, of the University of Tennessee, the Rafting Company, Mountain Challenge, or by any other person including the Evangelical Covenant Church.

We (I), the individual(s) and our (my) heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend, and indemnify the Evangelical Covenant Church, the University of Tennessee, the Rafting Company, Mountain Challenge, and their respective owners, directors, officers, agents, and employees and volunteers from any and all claims, actions or losses for bodily injury, property damage, death, loss of services or otherwise which may arise out of the attendees use of whitewater rafting equipment, kayaking equipment, horses, paintball equipment, mountain bikes, hiking trails, or participation in whitewater rafting, kayaking, horseback riding, paintball activities, mountain biking, and hiking, and general participation at CHIC.

We (I), the parent(s) or guardian(s) specifically understand that we (I) are releasing, discharging and waiving any claims or actions that we (I) may have individually or on behalf of our child or ward presently or in the future for the negligent acts or other conduct by the owners, directors, officers, agents, and employees and volunteers of The University of Tennessee, the Rafting Company, Mountain Challenge, and the Evangelical Covenant Church.

Parent /Guardian Name _____

Signature _____ Date _____

Parent /Guardian Name _____

Signature _____ Date _____

*Must be signed by both parents unless extenuating circumstances prevent it.

STANDARDS OF CONDUCT

Compliance with the following standards of conduct is expected of all students and adults at CHIC. If you fail to comply, you may be sent home from CHIC at your own expense.

1. Use and/or possession of alcohol and/or other controlled substances, fireworks, firearms, or other dangerous weapons (e.g., knives, slingshots, laser pointers, etc.) during CHIC is prohibited.
2. No student or adult may leave campus without first obtaining permission from the Information Center (except during recreation and excursion hours, 12:30 P.M.- 5:00 P.M.).
3. Evening dorm time, check-in, and lights out are strictly enforced.
4. Individuals are liable (and will be billed) for any damage they intentionally or accidentally commit to the University of Tennessee or to CHIC property.
5. Attendance is mandatory for all general sessions, base camp gatherings, and small groups.
6. The CHIC identification provided must be worn at all times by students and adults.
7. All students are under the supervision of their respective counselors. Counselors and residence hall supervisors have the right to confiscate, for the duration of CHIC, any items used abusively by students.
8. Male and female students may spend time together in residence hall lounges. Under NO circumstances are males allowed in residence hall rooms or on floors where females are housed, nor are females allowed in residence hall rooms or on floors where males are housed.
9. Quiet hours (12:30 A.M. - 6:30 A.M.) are to be observed in residence halls (no music, yelling, cheerleading, etc.).
10. Smoking is not permitted in any of the residence halls or UT buildings.
11. The University of Tennessee does not allow the use of in-line skates, roller blades, roller-skates, scooters, and skateboards on the campus. Bicycles are allowed on designated walkways. Skateboards and in-line skates may only be used in the Knoxville Skate Park.
12. Throwing objects from residence hall windows is a federal offense. Perpetrators are sent home at their own expense and the University of Tennessee may prosecute.
13. Please utilize all pedestrian crosswalks. Do NOT jaywalk because it provides a significant risk to your safety, given the amount of traffic that will be present during this event. Perpetrators may be fined and/or cited for refusing to use pedestrian crosswalks.

Student Name _____

Signature _____ Date _____

EMERGENCY CONTACT

In case of emergency and parent or guardian is unable to be reached, please contact:

Primary Contact _____

Phone _____

Secondary Contact _____

Phone _____

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