## Youth Registration

Register by April 30, 2022 to receive the early bird rates.

Registration Deadline: June 1, 2022 \*\* Please register online at pcaga.org/families \*\*

### Rising 6th-12th Graders (Fall 2022)

Child's Name_		Child's	Nickname			
Date of Birth		Grade (	Fall 2022)			Female
Home Address		City		State	Zip	
Name of Mother			Cell (required)			
Name of Father Cell (required)						
Email Address	(to send registra	ation confirmation)				
Hotel Name (during GA 2022)Phone						
					1	
Register E	Early to Save	e ————	Early Bird by 4/30	Regular 5/1-6/1	Onsite* 6/20-6/23	Subtotal
Wednesday 6/22/22	8:30am - 3:30pm	Birmingham's Christian Service Mission and Flag Football	\$10	\$15	\$20	\$
Thursday 6/23/22	8:30am - 4:00pm	Birmingham's Christian Service Mission and Top Golf	\$25	\$30	\$35	\$
				Additional C	Child Discount	\$
Youth Grand Total						\$

Families with multiple children attending planned events will receive a \$5 discount per additional child. Please fill out one sheet per child.

For paper registrations, please make checks payable to Evangel Presbytery with note PCA GA 2022. Please mail registration and check to Evan Travers, Briarwood Presbyterian Church, 2310 Briarwood Trace, Birmingham, AL 35243.

Snacks and lunch are provided at these activities. If your child has food allergies or special dietary needs, please send a labeled lunch and snacks for them. If you have a child with special needs, please email: GA2022Reg@gmail.com.

#### Please register online pcaga.org/families

Your registration is not complete without submission of all Permission, Health & Release Forms, please see the website for details: https://pcaga.org/families

#### **Questions?**

Email: jellerbee@briarwood.org

<sup>\*</sup>Onsite registration only if space available.

# Child Permission, Health & Release Form

#### (Please photocopy and fill out one sheet for each child.)

If you prefer to register online, these forms are available at pcaga.org/families

Child's Name	Birthday (mm/dd/yyyy)	Age		
Home Address	CityState	Zip		
Name of Mother	Cell (required)			
Name of Father	Cell (required)			
Location during General Assembly				
lotel Name (during GA 2022)Phone				
Emergency Information				
Medical Insurance Co	Policy #	:		
Name of Primary Policy Holder				
Medical History				
List any pre-existing or present medical condition(s):				
Name and dosage of medication that must be taken:				
Check the following areas of concern for your child, adding necessary comments below:				
Does your child have allergies to: Medications Food Insect Bites Other				
Please explain				
Does your child require an Epi-pen? Yes No Does he/she know how to use it? Yes No				
Does your child suffer from, or has ever experienced, or is currently being treated for:				
☐ Asthma ☐ Diabetes ☐ Epilepsy/Seizure Disorder ☐ Heart Trouble ☐ Physical Handicap				
Please explain				
Does your child have any Special Needs?    Yes    No				
Please explain				
Date of last Tetanus Shot?				
Does your child wear glasses or contacts? $\square$ Yes $\square$ No $\square$ Does your child know how to swim? $\square$ Yes $\square$ No				
Should your child's activities be restricted for any reason? $\square$ Yes $\square$ No				
Please explain				
Mail comple	eted form to:			
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Evan Travers, Briarwood Presbyterian Church, 2310 Briarwood Trace, Birmingham, AL 35243

#### (Please photocopy and fill out one sheet for each child.)

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Child's Name			

#### **Permission and Release Agreement**

My child has permission to participate in all of the activities for his/her age group that are scheduled for the 49th General Assembly in Birmingham, AL. In the event my child becomes ill or is injured while under the supervision of the Nursery, Elementary, or Youth staff, I approve the appropriate authorities taking the following actions:

- 1. Contact the parent or legal guardian and follow his/her instructions.
- 2. In the event of an emergency, when neither parent nor guardian can be reached immediately, the General Assembly Host Committee, or authorities of the Presbyterian Church in America are authorized to use their best judgment in contacting a physician or other health care provider and to authorize the provision of necessary medical, surgical, or other care.
- 3. In the event of such an emergency, I also waive any rights to privacy of any medical information related to the emergency, in order that the appropriate care might be obtained. In consideration of the General Assembly Host Committee, Evangel Presbytery and the Presbyterian Church in America (a Corporation) making available the 49th General Assembly Nursery, Elementary and Youth activities, I hereby waive, release and discharge its agents, volunteers and employees from any and all claims and liability of any kind or nature. We have read the above and understand this release. Furthermore, in the event of an emergency, said care providers have our permission to administer first aid or obtain emergency medical treatment in our child's best interest. We agree to pay all expenses incurred due to an emergency involving our child.

Photo Release: Presbyterian Church in America and its legal representatives and assigns, retain the right and permission to publish, without charge, photographs taken during the General Assembly. These photographs may be used in publications, including electronic publications, or in audio-visual presentations, promotional literature, advertising, or in other similar ways.

Medical Release: While we do our best to provide the safest possible environment for our events, the Presbyterian Church in America cannot be held responsible for any medical emergencies that occur during the General Assembly.

Cancellation Policy: If you must cancel, please request a refund in writing by email to: GA2022Reg@gmail.com. There are no refunds after June 8, 2022.

#### I understand this is a Release and with that knowledge, I voluntarily sign it.

First Name	Last Name
Signature	Date
Comments	

#### Mail completed form to:

Evan Travers, Briarwood Presbyterian Church, 2310 Briarwood Trace, Birmingham, AL 35243