SDBC SALT SPRING TRIP 2018 Registration Form

The following is the registration form for the South Delta Baptist Church 2018 outreach trip to Salt Spring Island. The trip departs on **June 30th**, **2018** and returns **July 7th**, **2018**. It involves eight days of community service, youth activities, and outreach. The base cost for the trip is **\$210.00**. Additional costs include spending money for snacks and trips to town (approx. \$30 recommended). Because Salt Spring is close to Delta, it is possible to come for a smaller portion of the trip. However, you are required to either arrive or leave on our two "Ferry Days," either Tuesday, July 3rd or Thursday, July 5th. We will not be able to accommodate pick-up or drop-off on any other days. Also, because of organizational and team dynamics, you must have a *valid reason* (as determined by the youth staff) for not staying for the whole time, which needs to be confirmed prior to attending the trip.

To register, fill out the attached release form (<u>ALL SECTIONS</u> MUST BE FILLED OUT FOR FORM TO BE CONSIDERED COMPLETE), have a parent or guardian sign it (unless you will be 19 or older as of June 14, 2018), and include a **\$25.00** non-refundable deposit (cheques should be made out to South Delta Baptist Church).

Return the completed release form with deposit to Kyle McDonald or hand it in to the church office during office hours (9AM to 4:00PM, Monday to Thursday). The early registration deadline is **Sunday, May 27th, 2018**. After this deadline, the base cost of the trip **increases** to **\$240.00**. The final payment deadline is Thursday, June 14th, 2018. After this date, registrations may no longer be accepted due to organizational challenges.

We will be having a team meeting for preparation on **Thursday**, **June 14th** from **7-8:30PM** in the Chapel. You are **required** to make this team meeting. Parents are welcome to attend, but are not required to make the team meeting.

Tax receipts will be issued for all payments to the cost of the trip that are not earned through fundraising (including the deposit).

Once you have registered, begin praying for the trip. You can also begin fundraising right away by selling grocery store gift certificates. These are an excellent way to raise money to go toward the cost of the trip. Many past team members have raised the entire cost of the trip though selling our grocery store gift certificates. If you would like more information about the trip or grocery store gift certificates, contact Kyle McDonald @ 604.943.8244 or email kmcdonald@southdelta.org.

We look forward to having you be a part of our Salt Spring 2018 team!

Event: Salt Spring 2018 Date: June 30th - July 7th, 2018

Medical Information

Name:		Age:	_ Birth Date:
Home Phone:		Cell Phone: _	
Address:		City:	P/Code:
In Emergency Notify: _			Phone:
Family Doctor:			Phone:
BC Medical Number: _			
Health History:			
Allergies	□ Insect Stings	☐ Heart Condition	☐ Frequent Colds
Hay Fever	□ Asthma	□ Epilepsy	☐ Nervous Disorder
☐ Frequent Sto	mach Upset	Other	
*If any of the above are	e checked, please give	e details (i.e. include norn	nal treatment of allergic reactions).
*Date of last tetanus sl	not:		
*Name and dosage of	any medications that r	nust be taken:	
*Any swimming restrict	ions? □Yes □N	o Any activity restric	tions? ☐ Yes ☐ No
What restrictions?			
		ation to Treat a Mir	
	oe reached in an eme	ergency, I (we) the under	rsigned parents or legal guardian, of
			horize and consent to any x-ray
			and emergency hospital care which pecial supervision of any member of
the medical staff and e	emergency room staff.	It is understood that this	authorization is given in advance of
			ut is given to provide authority and
			cise of his best judgment may deem ersigned prior to rendering treatment
			hheld if the undersigned cannot be
reached.		1 W D 1	
		ability Release	
			fety in mind. However, no activity is gym-related sports, skate boarding,
			ave the inherent possibility for risk,
therefore, we want to	alert parents, guardia	ns and individuals to the	m. By signing this form, the parents,
•	•	•	hazards inherent in these activities.
		•	vners, volunteers, members, agents, e person(s) or property undersigned.
			Delta Baptist Church from any claim,
demand, action, suit,	or proceeding. The p	arents or guardians unde	erstand that they are signing for the
minor(s) listed on this f	orm and that the signa	ature is for both a medical	and liability release.
Parent or Guardian Sig	nature:	signature if you are 19 o	Date:
	(Your own	signature if you are 19 or	over)