

Beargrass Youth Ministries Permission Form for 2012

I, _____, give permission for _____ to attend events with Beargrass Christian Church (Disciples of Christ) Youth Ministries during the year 2011. I agree that I will not hold Beargrass Christian Church (Disciples of Christ) responsible for any accidents or injuries which may occur during this time.

Signature: _____ Date: _____

Home Address: _____

Home Phone: _____

Parent Work Phone: _____

Parent Cell Phone: _____

Youth Birthdate: _____

Emergency Contacts: _____

Hospitalization Policy with: _____

Insurance Co. Claims Address: _____

Policy No.: _____ Type of Coverage: _____

Parent Employer Name and Address: _____

Medical Information

Allergies: _____

Current Medications: _____

Current Medical Problems: _____

Special Dietary Needs: _____

Other: _____

Limited Power of Attorney
(For Medical Treatment)

KNOW ALL PEOPLE BY THESE PRESENTS: That I, _____,
legal and custodial parent of _____, have made, constituted, and by
these presents to make, constitute, and appoint Julie R. Brown or any other designated youth ministry
adult volunteer as true and lawful attorney for those limited purposes set out herein, for me in my
name, place and stead to:

(A) Seek on my behalf and for my child named above all emergency medical, hospitalizations,
doctors' services and other medical treatments as my attorney-in-fact may deem best in the event that
my child as aforesaid should be in need of same due to an accident or the sudden illness of said child.
Further, to authorize said attorney to execute and sign any and all admission forms, medical
authorizations, releases, and any and all other documents necessary to receive medical treatment.

(B) This Limited Power of Attorney shall not be construed to give this attorney-in-fact any other
powers other than as stated herein and that the sole purpose of this Limited Power of Attorney is to
obtain medical services or treatment for my child in the event of an accident or sudden illness.

(C) This Limited Power of Attorney shall cover the period of the year two thousand eleven and shall
only be used and effective if my attorney-in-fact can attend and accompany my child on a particular
event for which I give permission. My attorney-in-fact shall evidence my permission before seeking any
medical service or treatment for said child.

IN WITNESS WHEREOF, I have hereunto set my name this ____ day of _____, 2011.

_____ (Signature)

STATE OF KENTUCKY

County of _____

I, the undersigned Notary Public for the above County and State, do hereby certify that the foregoing
Limited Power of Attorney was this day produced before me in said State and was acknowledged and
signed by _____, to be his/her free and voluntary act and deed for
the purposes set out herein.

Notary Public, State At Large, Kentucky

My Commission Expires: _____

First Christian Church
(Disciples of Christ)
Bowling Green,

Children & Youth Ministries Intern 2009

Purpose: The Internship for Children and Youth Ministry offers an opportunity for a college or university student to explore their gifts and talents while contributing to the ministry of First Christian Church. The internship shall be for a period of 1 semester (September-December) or (January –May) and may be renewed.

Accountability: The Children and Youth Ministry Intern shall be under the direct supervision of the Associate Minister.

Requirements for Application

1. Be at least 21 years of age or turn 21 years of age prior to the end of the internship, so that he or she can work with high school age youth.
2. Have a background check and clearance on file and provide access to at least three personal character references.
3. Have a TB skin test before beginning work.

Personal Qualities

1. Exhibit maturity, confidence, gentleness, and warmth.
2. Have a genuine love for children and youth.
3. Have a respectful manner and model appropriate behavior for the children and youth.

Responsibilities

1. Work cooperatively with the Ministers, lay leaders, youth sponsors, children's ministry staff in assisting the semester's program for children and youth.
 - a. This may include: creating, leading and or assisting with special youth events, (Trunk or Treat, Easter Egg Hunt, Prayer Partner Breakfast, 30 Hour Famine, Christmas Program, Youth Trips, etc)
 - b. In some cases help the Associate Minister and youth sponsors plan youth group.
 - c. Establish and Maintain Communication with children, youth and their parents
This may include sending mailings, Facebook messages, emails, making phone calls, etc
2. Demonstrate effective organizational and administration skills.
Exhibit a cooperative spirit. Be a good listener and employ effective communication skills.
3. Attend worship at least 3 times a month
 - a. Be available to assist in Sunday School and Children Worship.
 - b. Be welcoming and inviting to all youth and children and their parents who may be in worship
 - c. Build relationships with congregation.
4. Help to provide a safe environment for children and youth to mature spiritually, socially, physically, and mentally.
5. Be creative in leadership, teaching, and relationship building.
6. This position averages 10 hour a week. Some weeks may be more than ten and some may be less.

Youth Ministry Intern

POSITION DESCRIPTION

The Youth Minister Intern provides program and administrative leadership for MSPC youth group.

- A. 10 hour weekly commitment, nominal (some weeks more, some less)
- B. (Fall Semester) August – December, (Spring Semester) January - May
- C. Leadership skills, enthusiasm, openness to all of creation, and a willingness to grow and serve.

RESPONSIBILITIES:

to encourage and welcome Youth to worship and weekly events
to establish and maintain communication with Youth at UK
to aid in fellowship events for youth
to emphasize mission as a component of all programming
to communicate the Youth Ministry program within the church and community
to be involved and active in Youth's lives

TASKS

to encourage and welcome Youth to worship and weekly events
welcome college students to Sunday morning worship and weekly events
encourage students to attend Sunday worship and weekly events

to establish and maintain communication with Youth
send mailings, emails, and makes phone calls to new and current members.
send weekly emails about activities
send Birthday and thank you cards when needed
keeps all addresses up to date
maintain Facebook's group site

to aid in fellowship events for Youth
help with special events such as back-to-school parties or study nights
help with weekend events such as ski trips
help with weekend retreats, mission trips or recreational activities

to emphasize mission as a component of all programming
lead occasional local mission projects, such as serving the Thursday Night Meal

to communicate the Youth Ministry program within the church and community
assist in writing monthly articles for Maxwell in Motion
aid in maintain data base of current/potential college participants

to be involved in Youth's Lives
attend sporting events or other events the youth are involved in outside of church

ACCOUNTABILITY:

The intern is accountable to the Youth Minister, in cooperation with the Youth Committee.

PERFORMANCE REVIEW

A review and evaluation will be conducted each semester in cooperation with the Youth Committee & Personal Committee

October 7, 2008

**Limited Power of Attorney
(For Medical Treatment)**

KNOW ALL PEOPLE BY THESE PRESENTS: That I, _____,
legal and custodial parent of _____, have made, constituted, and by these
presents to make, constitute, and appoint Kelley Dick or any other designated youth ministry adult volunteer as
true and lawful attorney for those limited purposes set out herein, for me in my name, place and stead to:

- (A) Seek on my behalf and for my child named above all emergency medical, hospitalizations, doctors' services and other medical treatments as my attorney-in-fact may deem best in the event that my child as aforesaid should be in need of same due to an accident or the sudden illness of said child. Further, to authorize said attorney to execute and sign any and all admission forms, medical authorizations, releases, and any and all other documents necessary to receive medical treatment.
- (B) This Limited Power of Attorney shall not be construed to give this attorney-in-fact any other powers other than as stated herein and that the sole purpose of this Limited Power of Attorney is to obtain medical services or treatment for my child in the event of an accident or sudden illness.
- (C) This Limited Power of Attorney shall cover the period of the year two thousand eleven and shall only be used and effective if my attorney-in-fact can attend and accompany my child on a particular event for which I give permission. My attorney-in-fact shall evidence my permission before seeking any medical service or treatment for said child.

IN WITNESS WHEREOF, I have hereunto set my name this ____ day of _____, 2012.

_____ (Signature)

STATE OF KENTUCKY

County of _____

I, the undersigned Notary Public for the above County and State, do hereby certify that the foregoing Limited Power of Attorney was this day produced before me in said State and was acknowledged and signed by _____, to be his/her free and voluntary act and deed for the purposes set out herein.

Notary Public, State At Large, Kentucky

My Commission Expires: _____

PERMISSION FORM FOR TRIPS ASSOCIATED WITH FIRST CHRISTIAN
CHURCH(Disciples of Christ) BOWLING GREEN

2010-2011 Academic School Year

Name of Youth Participant _____

Date of Birth _____ Phone # _____

Grade of Youth _____

Full Address _____

An emergency contact person(other than parent)

Phone Number(s) _____

Name of Insurance Company (if you have it)

_____ Policy # _____

Physician Name _____ Phone # _____

Please list any medical allergies, medications being taken, medical problems, or other pertinent information: _____

I understand that, in the event medical treatment is required, every effort will be made to contact me. However, if I cannot be reached, I give my permission for a representative of First Christian Church,(Disciples of Christ) Bowling Green sponsor to secure the services of a licensed physician to provide the care necessary

Signed _____ Date _____

(Parent or legal guardian)

**Beargrass Christian Church
2011-2012 Parent Information Sheet**

Name: _____

Names of Youth:

Name: _____ **Grade:** _____

Name: _____ **Grade:** _____

Name: _____ **Grade:** _____

Name: _____ **Grade:** _____

Cell Phone Number: _____

Home Phone Number: _____

Preferred email address: _____

Areas where I would be interested in volunteering (please circle all that apply)

Space for Grace

Mission Trip

Camp

Retreats

Lock In

Ski Trip

Youth Sponsor

Coffee Bar

Sunday school teacher

Biosphere

**FIRST CHRISTIAN CHURCH
(DISCIPLES OF CHRIST)
Bowling Green, Kentucky**

The following is a policy for dealing with complaints of sexual exploitation, harassment and discrimination by employees and volunteers in the church. A provision for child/youth protection is included.

Policy Statement

First Christian Church is committed to creating and maintaining a worship and faithful community in which members, friends, staff and volunteers are protected from discrimination, harassment, exploitation or intimidation. Abuse by anyone engaged in the ministry of First Christian Church, whether voluntary or paid, is unethical and unprofessional behavior and will not be tolerated within the church.

First Christian Church is committed to creating a protective and healthy environment in which children and young people can learn about and experience God's love free from the threat of exploitation by paid staff or volunteers. It is the responsibility of the church to screen and train those who will be sharing in ministry with children and youth. It is requested that employees and authorized volunteers complete an "Employment/Authorized Volunteer Application and Disclosure Form" prior to beginning their contact with children and youth.

If such misconduct or exploitation occurs, First Christian Church must make a clear and just response as specified in the procedures section written below.

Definitions:

Sexual Exploitation: Sexual activity or contact including but not limited to sexual intercourse. It is unwelcome sexual advances, requests for sexual favors, taking advantage of a fiduciary relationship, and other verbal or physical conduct of a sexual nature when submission to such conduct is made a term or condition of remaining in the environment. Sexual harassment occurs when submission to or rejection of the conduct is used as a basis for employment, interferes with a person's work or volunteer performance, or creates an intimidating, hostile or offensive environment.

Harassment and discrimination takes many forms, included, but not limited to, innuendo, suggestive comments, threats, insults, jokes, horseplay, rumors, pictures, signs, writings, e-mail, and gestures, based upon another person's gender, race, age, national origin, color, religion or disability.

Procedures for Handling Complaints

Complaints may be addressed to any member of the Personnel Committee, the minister, any associate minister, the Board Chair, the Board Chair-Elect or the Board Past-Chair, Complaints are requested in writing.

Three members of the Personnel Committee shall confidentially gather statements or other information from individuals involved in the alleged incident(s) and from others who may have pertinent information. To the extent possible, the claimant's confidentiality and that of any witnesses and the alleged harasser will be protected against unnecessary disclosure.

If there is any suspicion of child abuse or child neglect, it will be reported immediately to the appropriate authority.

The accused shall be made aware of the complaint and given an opportunity to respond.

Finding that sexual harassment, exploitation or discrimination occurred, a written report will be given to the Executive Committee of the Church Board.

Finding that sexual harassment, exploitation or discrimination occurred; one or more of the following steps will be taken by the Executive Committee of the Church Board given approval by the Board:

- A. Formal reprimand with defined expectations for changed behavior, including possible notification of appropriate ministries.
- B. Recommending or requiring a program of growth that may include education and/or counseling.
- C. Probation from duties with terms of probation and/or reinstatement clearly defined.
- D. Dismissal from employment or volunteer leadership position.
- E. If the accused volunteer or employee is a minister with standing in the Christian Church (Disciples of Christ), the Board Chair or Board Chair-Elect shall inform the regional minister of the findings and submit it to the Committee on Ministry of the Christian Church in Kentucky. If the minister's standing with the Christian Church in Kentucky is revoked, that will be grounds for immediate dismissal from all duties at First Christian Church in Bowling Green, Kentucky.
- F. If such activity is of a criminal nature, a representative of the Church Board will so inform the appropriate authority within our jurisdiction.

Initial after reading: _____

**Beargrass Christian Church
2011-2012 Youth Information Sheet**

Name: _____

School: _____ **Grade:** _____

Address: _____

Cell Phone Number: _____

Home Phone Number: _____

Email address: _____

Do you have Facebook? _____

When is your birthday? _____

Do you play any sports? Or participate in any extracurricular activities?

Name 1 thing that you are most excited about this year at Beargrass?

First Christian Church (Disciples of Christ)
Policy Statement on Child Protection
June, 2004 (revised February, 2011)

People were bringing little children to him in order that he might touch them; and the disciples spoke sternly to them. But when Jesus saw this he was indignant and said to them, "Let the little children come to me; do not stop them; for it is to such as these that the kingdom of God belongs. Truly I tell you, whoever does not receive the kingdom of God as a little child will never enter it." And he took them up in his arms and laid his hands on them, and blessed them.

~Mark 10:13-16

First Christian Church in Mount Sterling, Kentucky has a long tradition of welcoming, loving and valuing members of all ages, including children. This community has been a sanctuary and safe place for children to develop their faith in God through Jesus Christ. To assure that this tradition continues, a plan for the preservation of child safety, and for the response of the church should this safety be compromised or alleged, has been established. The plan has four parts: selection and screening, supervision, reporting and response. At the heart of this policy is the safe, adequate and caring supervision of our children. More specifically, the church will follow the "rule of three." This rule will see that children are not alone with an adult—three people will be present.

As a participant in First Christian Church's ministry with youth and children, you have an extremely important ministry in the life of the church. You are not alone in this venture: your number one partner is God. As God's partner you will feel the need to call on God regularly in prayer and in your preparation and study. You are also a partner with the ministerial staff and the Family Ministry Team. You should feel free to call on them for guidance and resources as needed. In any work with children and youth, you are also a partner with parents.

First Christian Church is genuinely concerned that we provide the safest possible place for our children and youth as they learn of God's love for them. We have adopted some procedures for screening and supervising that have been recommended to maximize the sharing of God's Good News and minimize possible problems. Your ministry is extremely valuable to the church. Your contribution to the lives of our young people may never be fully known to you, but it is very real and lasting.

Telephone numbers to know and use:

Church Office	
Saint Joseph Mount Sterling	
Montgomery County Health Department	
Ambulance	911
Fire Department	911
Police Department	911
Cabinet for Families and Children (Cash Assistance—Food Stamps—Medical Assistance)	
Cabinet for Families and Children (Adult Services—Adoption—Child Care—Foster Care)	
Abuse Hotline	

Applicability

This policy applies to all persons who desire to serve in ministry involving children or youth. It applies to employees, including ministers, and regular volunteers. It applies to those who desire to serve as childcare attendants, as church school teachers or aides in youth ministry, in summer programs and in any other program of the church involving children and youth.

Oversight and Responsibility

Oversight of this policy is to be carried out by the Christian Education Team. This team shall be responsible for the review of applications for volunteer service, to oversee the supervision of all persons who serve with children and youth, to report to the Board Moderator and Senior Minister any violation of this policy and to direct the church's response to any accusation or claim of child abuse. The Christian Education Team shall also ensure that all volunteer workers and employees involved with children and youth are trained in the prevention, recognition, reporting and response to child abuse. This will include ongoing assessment through conversation and other means of communication with those in the congregation and community.

Definitions

As used in this statement, unless the context otherwise requires:

- *Abused or Neglected Child* means a child whose health or welfare is harmed or threatened with harm when any person inflicts or allows to be inflicted upon a child physical or emotional injury by other than accidental means; or commits or allows to be committed an act of sexual abuse, or sexual exploitation upon the child.
- *Child* means any person who has not reached their eighteenth birthday.
- *Dependent Child* means any child who is under improper care not due to an intentional act of the parent or guardian.
- *Emotional Harm* means harm to the mental or psychological capacity or emotional stability of a child.
- *Sexual Abuse* includes, but is not necessarily limited to, any contacts or interactions between a child and an adult in which the adult uses or allows, permits or encourages the use of the child for purpose of sexual stimulation of the perpetrator or another person.
- *Regular Volunteer* shall be a person who is engaged in a teacher/mentor role with a child or group of children and whose relationship brings them into contact with the child or children on more than three occasions over a 180 day period. The relationship with the child or children shall be on more than a mere proximal basis. Any doubt as to whether an individual is a regular volunteer shall be resolved by finding the individual to be subject to the regular volunteer requirements.

Part I: Selection and Screening

The process of selection and screening applies to both employees and regular volunteers. This process involved the following steps.

1. Application
2. Interview

3. Reference Checks
4. Six Month Rule for Volunteers
5. Assessment

1. Application: The application serves as both application and screening form. It is designed to provide the church with information concerning the applicant's past conduct and also to identify any potential circumstance which would indicate a propensity to molest children. The application shall be filled out by all persons who desire to work or serve in any capacity with children from infancy through high school age. Applications are to be reviewed by the Christian Education Team and approved before any additional selection steps are taken. A copy of the application is available for download. Completed application forms are to be retained in a locked file.
2. Interview: Interview is required, using the application form as a point of reference. The purposes of the interview are to tell each person who desires to work with children or youth the steps we are taking to protect our children from abuse of all types, including sexual, psychological and physical. The interview will also serve to give the applicant an opportunity to discuss the matter. Applicants should be asked if there is anything they would add to what they wrote on the application form, particularly if they indicated that they had been abused as a child. The interview gives the Christian Education Team an opportunity to observe the applicant as well as to hear the applicant's response. A written record of the interview is to be retained with the application in a locked file.
3. Reference Checks: An attempt to contact listed references will be made in every case and a written record of the contacts kept in the locked file with the application and the record of the interview. Written references are preferable to oral references, although both are permitted. A copy of the written reference for is available for download. In screening minors, either as volunteers or paid child care attendants, a written parental statement is required which states that the parent knows no reason why the child should not be permitted to serve in the position. References should also be obtained from two of the following sources:

- Other Youth Programs

- A School Teacher

- Youth Workers within First Christian Church

- Youth Workers outside First Christian Church

In addition to checking references, a criminal record check is required for all applicants desiring to work in positions involving contact with children and youth. An information form for requesting a criminal records check is attached.

4. Six Month Rule: Regular volunteers are prohibited from working with children or youth until they have been members or have been in regular attendance at the church for at least six months. The six month rule permits church members and staff to become acquainted with applicants prior to their beginning to serve with children. The period

also serves to acquaint prospective volunteers with the church's policy to protect its children.

5. Assessment: An assessment must be made of the application, interview, reference comments and personal observations, and a specific determination made that the applicant has been screened and is considered suitable to serve with children and youth of First Christian Church. The record of this assessment is to be recorded on the downloaded form and is to be kept with other documents in the locked file. All of the findings during the application, interview and assessment stages will remain confidential. This information will be made available only to those involved with the application, interview and assessment stages.

Part II: Supervision

Supervision in the case of children or youth workers means establishing an environment and policies wherein people do not have an opportunity to abuse a child. Commensurately, the following procedures will be observed at First Christian Church:

1. First Christian Church requires that at least two responsible persons are present at all times at activities involving children and youth.
2. At least two adults shall accompany minors on field trips, outings or camping trips.
3. At least two adults shall accompany minors on any program involving an overnight stay.
4. A cleric, and employee or a regular volunteer must obtain the consent of a child's parent or legal guardian before inviting a minor to visit in the adult's home.
5. If a minor needs a ride home after a meeting, two adults should be present.
6. All classroom doors shall have windows, so that activities within can be clearly observed by persons in the corridor.
7. Parental permission is required for a child or youth to have a private meeting with an adult, including a minister. If parental permission is inappropriate in a given case, the meeting shall take place where the adult and youth can be seen, through a window, an open door or in a room with another adult present who can see but not necessarily hear the conversation.

As part of ongoing volunteer supervision and training, each year the Senior Minister and the Associate Minister will spend time with all volunteers mutually reflecting on youth ministry experiences. This will seek to ensure the ministry of First Christian Church to youth and families is a deep and meaningful one.

Part III: Reporting

Kentucky Revised Statute 620.030 requires that any person who knows or has "reasonable cause to believe" a child is "dependent, neglected or abused" report this fact to the local or state police, the county attorney, the Commonwealth attorney, or the Cabinet for Families and Children. (See abuse hotline under "Numbers to Know and Use") The law also requires that any medical, school, child care or law enforcement personnel or agency which knows or has reasonable cause to believe a child is being abused or neglected report this fact to one of the authorities listed above. In the absence of a clergy-penitent privilege the individual who discovered the alleged abuse is responsible to make the required report.

Any person who is a volunteer worker or an employee of First Christian Church who knows or has reasonable cause to believe a child is dependent, neglected or abused is required, in addition, to report it immediately to his or her supervisor. The supervisor is then required to pass the report up the supervisory chain to the Senior Minister and Board Moderator. It is imperative that the Senior Minister and appropriate church official be aware of the allegation of child abuse as soon as possible. It is the responsibility of the Senior Minister or Board Moderator to notify the appropriate church officials, including the chair of the Christian Education Team. The Senior Minister and Board Moderator are also responsible for notifying the Regional Minister of the Christian Church (Disciples of Christ) in Kentucky, the church's insurance company and the church's attorney.

It is a requirement of the church that all regular volunteers and employees who work with children be provided with training to ensure that they know the symptoms indicating the possibility of child abuse.

Part IV: Response

If a report is ever made, report of the child abuse must be taken seriously. First Christian Church will deal responsibly with any allegation of child abuse. The Christian Education Team will serve as the response coordinating body within the church. All actions concerning the church's handling of the incident should be thoroughly documented. The church's response to a report of child abuse will depend upon the circumstances that exist in the case. Therefore, it is not possible to state all the specific steps that will be involved in every case. Nevertheless, certain minimum steps must be taken in every case, as follows:

1. Where the abuse or neglect creates a substantial risk of physical or emotional injury, the case will be reported to the authorities as discussed in Part III. If an employee or volunteer detects evidence of abuse he or she must report it to the minister of the church. Likewise, if a person confesses to perpetrating child abuse and such confession is not made in a situation where the clergy-penitent privilege applies; it is to be reported to state authorities.
2. Following the report to authorities, the Senior Minister and Board Moderator will form an investigative team of three to five persons from a list approved by the Christian Education Team. It is recommended that the Associate Minister and a representative from the Christian Education Team participate in this initial investigation together with other persons from the appropriate professional disciplines. They will exercise discretion and care in determining as soon as possible the necessary actions to be taken.

From the very beginning, care shall be taken to be sensitive to the needs of all involved and to prevent the reputation of anyone from being unnecessarily endangered by this investigation. Care shall also be taken to ensure that Christian love is extended to all persons involved, including the alleged perpetrator. It is the ministry of the church to respond responsibly to the person or persons alleged to have perpetrated the abuse. Care shall also be taken to not interfere with any ongoing investigation being conducted by civil authorities.

If the investigative team determines that it is clear the incident did not occur, the Senior Minister or Board Moderator will be so notified and the investigation process will then be suspended. The accused and the person who brought the allegation will then be

notified of the decision of the investigative team.

Should the investigative team determine that there is cause to believe that a valid claim exists, it will present a written report of the investigation to the Senior Minister and Board Moderator along with recommendation as to further action.

3. In every case of alleged child abuse, or whenever a person claims that someone has abused him or her, the allegations must be reported to the church's insurance company, the church's legal counsel and the Regional Minister.
4. If a church employee or worker is accused of child abuse, the accused person shall be immediately informed of the nature of the complaint and be removed from contact with children and youth pending further action.
5. If a victim of abuse has been identified, the Senior Minister and Board Moderator shall talk to the victim's parents. The parents should be informed that they have the right to anonymity, but that if the accused perpetrator has denied the allegation, anonymity will make the investigation more difficult. At all times care shall be taken to be extremely sensitive to the child, showing care and concern as to prevent harm. The care and safety of the child is the first priority. At all times let the child and the child's parents know that the church takes the matter very seriously and that the policy of the church is to deal with the situation responsibly. In like fashion, care shall be taken to be sensitive of the accused and to treat the accused with Christian love.
6. In some cases, it will be necessary to inform the church members of the occurrence of child abuse. A letter should be sent to the members so that they will hear it first from the Senior Minister and church officers, rather than the news media. The letter should go only to participating members and be marked confidential. The letter should be brief; for example, "(name) has been accused of an incident of child molestation in our church, and the matter is being investigated by the state Cabinet of Human Resources (or the Police, as appropriate.) (Name) denies any wrongdoing. We urge you not to discuss this matter with any person who is not a member of First Christian Church. We also urge you to remember this situation in prayer." The church's attorney should review the letter prior to mailing.
7. It is probably that a case of child abuse will eventually be revealed to the news media. All comments to the media should be made by the Senior Minister and Board Moderator. Where appropriate, allegations should be frankly admitted insofar as the investigative process will permit. The response of First Christian Church should be that "we have taken every precaution to protect the children and youth who are involved in our many ministries." The existence of this policy, Policy Statement on Child Protection, should be discussed to reinforce the church's intent to create an environment that is as safe as possible for children and youth. Let them know that the church has acted responsibly in accordance with Kentucky state laws and the church's policy. The church should report to the media the aggressive and extensive steps that are taken to reduce the risk and the response that the church has made to this reported child abuse.

First Christian Church (Disciples of Christ)

911 High Street

Paris, KY 40361

859-987-3940

www.firstchristianchurchparis.org

APPLICATION TO SERVICE IN MINISTRY TO CHILDREN OR YOUTH

NAME _____

ADDRESS _____

HOME PHONE _____ WORK PHONE _____

CELL PHONE _____ OTHER _____

EMAIL _____

For what area of ministry are you applying?

Age Group _____ Ministry Area _____

Describe any training and experience you have had in the ministry area for which you are applying.

What has been your church membership/affiliation over the past five years?

What church volunteer work have you done in the past five years? (Specifically include work with youth and children.)

What has been your employment in the area of youth or children at other churches or other organizations over the past five years?

Have you ever been charged with a crime? Explain.

Please list two references:

- I waive any right to see written references.
- I do not waive the right to see written references.

Name _____

Address _____

Phone _____

Name _____

Address _____

Phone _____

Signature _____ Date _____

First Christian Church (Disciples of Christ)

911 High Street

Paris, KY 40361

859-987-3940

www.firstchristianchurchparis.org

INFORMATION FOR CRIMINAL RECORDS CHECK AND AUTHORIZATION

Print Name:

Print full address:

Print Maiden Name, if applicable:

Print all aliases:

Date of Birth:

Place of Birth:

Social Security Number:

Today's Date:

Your signature below indicates that you give permission to First Christian Church to perform a background check. This information will be kept confidential.

Signature

Records sent to:

Christian Education Team
First Christian Church (Disciples of Christ)
911 High Street
Paris, KY 40361

First Christian Church (Disciples of Christ)

911 High Street

Paris, KY 40361

859-987-3940

www.firstchristianchurchparis.org

REFERENCE REPORT

The applicant listed below has applied to work with children and/or youth at First Christian Church. In order to determine the applicant's suitability, we are asking that you take a few minutes to complete and return this reference report. Your cooperation is greatly appreciated.

The Applicant:

- Has waived the right to see your reference.
- Has not waived the right to see your reference.

Name of Applicant: _____

Your Name: _____

Length of time you have known the applicant: _____

In what capacity do you know the applicant? (friend, teacher, employer, etc.)

Have you ever worked with or observed the applicant in any paid or volunteer position related to children and/or youth? Yes _____ No _____

If yes, please describe when you worked with the applicant and where (name of church or institution.):

Please state your opinion of the applicant's suitability for working with children and/or youth.

Do you know of any reason why the applicant should not be allowed to work with minors in our church? Yes _____ No _____ If yes, please fully explain:

Please list the names, addresses and telephone numbers of any additional individuals you feel should be contacted to verify the applicant's suitability for working with children and/or youth.

There is information about this applicant I am not comfortable about putting in this form and would prefer to discuss only in person or by telephone. Yes _____ No _____
If yes, please list a phone number where you may be reached during the day:

Signature _____

Date _____

Print Name _____

When you have completed and signed this form, please return it to:

Christian Education Team
First Christian Church (Disciples of Christ)
911 High Street
Paris, KY 40361

Parental Consent Form

Please return this form to:
First Christian Church (Disciples of Christ)
911 High Street
Paris, KY 40361
859-987-3940

Child's Name _____ Age _____ Birth Date _____

Parent or Guardian Name _____

Address _____ Phone (____) _____

City _____ State _____ Zip Code _____

Work Phone (____) _____ Cell Phone (____) _____

To Whom It May Concern:

The undersigned does hereby give permission for our (my) child, _____

_____, to attend and participate in activities sponsored by First Christian Church, Paris, KY and their representatives.

We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any X-ray examination, anesthetic, surgical or dental diagnosis or treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization.

Should it be necessary for our (my) child to return home due to medical reasons or otherwise, the undersigned shall assume all transportation costs.

The undersigned hereby gives permission for our (my) child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by First Christian Church, Paris, KY.

The undersigned does also grant permission for my child to receive over-the-counter medications for minor ailments such as: head ache, nausea, vomiting, diarrhea, rash, bug bites, minor cuts, scrapes or burns, and trusts the adult in care to administer said medications responsibly and will provide pertinent information regarding allergies of such medications.

(Signed by parent or guardian)

(Date)

Known food and/or drug allergies are as follows:

**First Christian Church
(Disciples of Christ)**

911 High Street
Paris, KY 40361
(859) 987-3940

**PERMISSION FOR
USE OF PHOTOGRAPH, LIKENESS, AND/OR VOICE**

This form is used to establish formal permission for participation in areas where pictures are taken, voices are recorded, and/or videotapes are made. Please call the church office if you have any questions.

I, _____, hereby **grant permission to First Christian Church (Disciples of Christ)** to use my photograph, likeness, and/or voice in any way that would reasonably portray programs of First Christian Church. I also give permission for First Christian Church (Disciples of Christ) to use my child(ren)'s _____ *(name of child or children if applicable)* photograph, likeness, and/or voice in any way that would reasonably portray programs of First Christian Church. This includes pictures for evangelism fliers, pictures taken during church programs (i.e. worship, Sunday school, VBS, church picnic, Easter Egg Hunt, etc.). I further release the Board of First Christian Church, Paris, KY, and any of its employees or agents, from any damages in using my or my child(ren)'s photograph, likeness, and/or voice. I do further certify that I am of full legal capacity to execute the above authorization and release on behalf of myself and my child(ren).

Date: _____

SIGNATURE/PARENT/LEGAL GUARDIAN

Youth Sponsor Medical Form

Please return this form to:
First Christian Church (Disciples of Christ)
911 High Street
Paris, KY 40361
859-987-3940

Name _____ Age _____ Birth Date _____

Social Security Number _____

Address _____ Phone (____) _____

City _____ State _____ Zip Code _____

Work Phone (____) _____ Cell Phone (____) _____

Known food and/or drug allergies are as follows:

_____ Hospital Insurance Yes



No



Insurance Company _____ Participant _____

Policy Number _____ Group Number _____

Billing Address _____ City _____ State _____

Zip Code _____ Phone Number (____) _____

Emergency Contact _____ Phone Number (____) _____

**Hurstbourne Christian Church Emergency
and Medical Release Form 2011:**

Name: _____ Age: _____ Birthday: _____

Address: _____

City: _____ ST: _____ Zip: _____

Phone Number: _____

Email Address: _____

Cell Phone: _____

Parents or Guardians Name: _____

Address (If Different than Above): _____

City: _____ ST: _____ Zip: _____

Phone Number: Daytime: _____ Nighttime: _____

Cell Phone: _____

Email Address: _____

Health Insurance Information:

Carrier: _____

Policy Number: _____

Primary Cardholder: _____

Primary Cardholder's Driver's License Number: _____

(Also need a photo copy of the Card and the Primary Card Holder's Driver's License. Please attach to this sheet.)

Limit of Liability: _____

Preferred Hospital for Treatment: _____

____ I/We do not have Health Insurance. _____ Signed/Date.

Health Questions:

1. Allergies: (medications, food, latex, bee stings, nuts, penicillin etc.)

Reaction: _____

2. Are you currently taking any Medications: Yes No

Please list all _____

In order for your child/youth to take any medications while attending a child/youth function, they must be in their original container accompanied by a written note signed by a parent/guardian, which will be kept on file, along with specific instructions on how and when to administer.

3. Are you Vegetarian? Yes or No

Any other Food Restrictions: _____

4. Name of Family Physician: _____

5. Date of Last Tetanus Shot: _____

6. Can your child/youth take Tylenol/Advil if needed? _____ Dosage: _____ Frequency: _____

7. Are there any health factors that would limit your child/youth's physical activity on a trip, during children/youth group, or on any child/youth outing? _____

If so, please list: _____

Any Other Information that needs to be known:

(This includes, but is not limited to types of medications preferred, including if child is or is not able to take pills, have his/her eye's flushed out with Visine, major food dislikes that will cause the child not to eat, major fears (such as water or heights), and any other knowledge that would be helpful for the children/youth sponsors to know to properly care for your child/youth in case of injury or accident. This

also includes any family issues (such as a parent in the military, divorce, etc...) that may come out during children/youth group functions.)

Participant's Covenant:

I, _____, promise to act in a manner that uplifts and encourages all around me in a Christian manner. I promise to follow all posted rules and those agreed upon for all children/youth activities.

I promise to leave behind all illegal substances, tobacco products, and other items that may cause me or the group harm. I remember that I am a representative of Hurstbourne Christian Church and will act accordingly. I will have fun. I will listen to our chaperones and other adults. I also realize that if I break a rule, which warrants me being sent home, my parents will be responsible for coming to pick me up as soon as possible. _____ Signed

Parent's Covenant:

I/We, the parent/guardian of _____, have read and understand the above covenant. We understand that we are responsible to pick up, as soon as possible, our youth if for any reason he/she is sent home early. I/We also covenant to pray for the group whenever we meet for children/youth activities. _____ Signed

___ The church may photograph and use my child's picture on its website, without names, for one year.

Emergency Medical Release:

I/We, the parent/guardian of _____, do hereby authorize that emergency medical and/or surgical care may be provided for my child/youth while on trips or in meetings with children/youth groups. In case, if I/We are not available to contact, please contact one of the following people (It is helpful if this is not the parent/s or guardian/s that filled this form out.):

Name: _____

Relationship to Adult: _____

Phone Number: _____

Alternative Number: _____

Name: _____

Relationship to Adult: _____

Phone Number: _____

Alternative Number: _____

Parent Permission

I, _____ (name of parent/guardian), hereby release and discharge Hurstbourne Christian Church, its staff, and other chaperoning adults from all claims of damage, demands, or actions whatsoever in any manner arising or growing out of my child's/youth participation in Hurstbourne Children/Youth activities. I understand the nature of children/youth activities and recognize the potential for injury in any environment, no matter how safe it is made. Except for those limitations named on this health/release form, I certify that _____, is healthy and fit to participate in children/youth events.

Date _____ Signature of Parent/Guardian: _____