

Charlie's Angels
2017
Mexico Mission Trip

Adult Forms

Participants Name: _____

Date Received: _____

- You will find that there is more than one page of certain forms. These forms go to different locations. It is necessary to have the forms completed in ink and not photo copied. In the areas that refer to teens, please cross out and write the word adult and sign.
- **Return all pages along with a copy of your driver's license.**
- If you have any questions while completing the forms, please feel free to contact Kathy Lanza at 400-6930.
- Effective 2008, passports are now required to cross the Mexican border.



Individual Mission Trip Participation Form

3636 Camino Del Rio North, Suite 215,
San Diego, CA 92108
Phone: 619.662.1200 Fax: 619.512.4360
www.amor.org – missionservices@amor.org

First Name _____ M.I. _____ Last Name _____

Date of Birth _____ Gender M F

Address _____

City _____ State _____ Zip _____

Phone _____

E-mail _____

Please indicate your age (check one box): 1-10 years 11-17 years Adult

Check the following that apply:

I am in High School and I will graduate in the year _____.

I am in College and I will graduate in the year _____.

College Name: _____

How many previous Amor mission trips have you participated in? _____

Please contact me about Volunteer or Intern opportunities (ages 18 and up).

Please email me Amor's prayer requests and ministry updates each month.

Please list all relatives that are on this trip (full name and relationship to you)

T-SHIRT SIZE	
Please check: <input checked="" type="radio"/>	
<input type="radio"/>	SMALL
<input type="radio"/>	MEDIUM
<input type="radio"/>	LARGE
<input type="radio"/>	X-LARGE
<input type="radio"/>	XX-LARGE
<input type="radio"/>	XXX-LARGE

Release of Liability/Consent

I have volunteered to participate with St. Charles Church
in a Mission Trip coordinated through Amor Ministries, 1664 Precision Park Lane, San Diego CA 92173 on 6/20/17.

This is NOT a Medical Release

I have recognized that participation on a trip of this nature may be hazardous or dangerous. Therefore, I am, for myself, my heirs, executor and/or administrator, remise and releasing and forever discharging Amor Ministries and all its officers, agents, servants and employees, acting officially or otherwise, from any and all reason of injury, damage (including property damage to any of my belongings), loss or death which may occur from any cause including, but not limited to any accident and/or occurrence while participating individually or with others while on this Mission Trip. I further understand that the release herein incorporates each and every provision of the "Statement of Commitment" signed by my group leader and/or the person(s) in charge of my group. In the event that said group leader and/or person(s) in charge does not readily have available a copy of said "Statement of Commitment", I further understand that I may obtain said copy by contacting any of the Amor representatives at 1664 Precision Park Lane, San Diego CA 92173, 619.662.1200 fax 619.512.4360. Notwithstanding the preceding, this release does not apply to claims arising out of Amor Ministries' gross negligence or intentional misconduct.

In consideration of my participation on this Mission Trip, I hereby irrevocably consent to and authorize the use, publication, transmission and reproduction of my name, likeness and image, and any information listed above in any and all media worldwide, by Amor Ministries, or anyone authorized by or acting on behalf of Amor Ministries, for promotional, fund-raising, advertising, marketing and/or public relations purposes. The information may be used by Amor Ministries in the regular course of business, but will not be disseminated to others except if required by law.

Participant _____ Date _____ Signature _____

Parental Consent

Parent _____ Name _____

Parent _____ Date _____

Signature Required for participants under age 18

MTID#: 170181

**Charlie's Angels
2017
Mexico Mission Trip**

**MEDICAL INFORMATION SHEET - ADULT PARTICIPANT
ST. CHARLES HIGH SCHOOL YOUTH GROUP
(CHARLIE'S ANGEL'S)**

Participant's Name (print) _____

Social Security # _____

Insurance Company _____

Policy # _____ Group # _____ Plan # _____ ID # _____

Eligibility / Coverage Verification Phone # _____

Pre-Treatment Authorization Phone # _____

Family Physician or Medical Group _____

Phone # _____

Allergies _____

Date of last Tetanus Shot _____

Medical Conditions / Disorders

Medications _____

Instructions / Dosages _____

Participant's Name (Print) _____

Participant's Signature _____ Date _____

Emergency contact phone numbers during trip:

Day _____ Evening _____ Cell _____

**Charlie's Angels
2017
Mexico Mission Trip**

**MEDICAL RELEASE FORM - ADULT
ST. CHARLES HIGH SCHOOL YOUTH GROUP
(CHARLIE'S ANGEL'S)**

I, _____ hereby agree to participate in all official activities during the Mexico Mission Trip, scheduled for **June 19th through June 25th 2017**. In the event of illness, injury, or emergency, I give my permission for the group leaders, Carlos DeMarchena, to make a decision regarding treatment. I also authorize the physician selected by the group leaders to secure proper treatment, for hospitalization and / or injection, anesthesia or surgery as necessary.

I HAVE READ AND AGREE TO THIS RELEASE

Participant's Name (print)

Participant's Signature

Date

ARCHDIOCESE OF SAN FRANCISCO

CODE OF ETHICS FOR YOUTH MINISTRY LEADERS

Code of Ethics for Youth Ministry Leaders

The National Federation for Catholic Youth Ministry has developed the following code of ethics for youth ministry leaders. The National Federation for Catholic Youth Ministry recommends that youth ministry leaders adopt this code by signing, dating, and placing it in their personnel file. This code of ethics is intended for youth ministry leaders regardless of employment status within the church. While this code may be used in conjunction with existing diocesan policies, protocols or codes, it is not intended to supersede them.

Professional Ethical Obligations

1. Ministerial Role

- Youth ministry leaders work collaboratively with the pastor (and/or other supervisors) and associates in ministry.
- Youth ministry leaders faithfully represent the teachings of the Catholic Church with integrity in word and action.
- Youth ministry leaders are competent and receive education and training commensurate with their role(s) and responsibilities (§ 231, Code of Canon Law).
- Youth ministry leaders respect the diversity of spiritualities in the faith community and will not make their personal form of spirituality normative.

2. Inclusion

- Youth ministry leaders recognize the dignity of each person and refrain from behaviors or words that are disrespectful of anyone or any group.
- Youth ministry leaders serve all people without regard to gender, creed, national origin, race, ethnicity, age, sexual orientation, marital status, socioeconomic status, immigration status, or political beliefs.
- Youth ministry leaders ensure that all persons have access to the resources, services, and opportunities they require with particular regard for persons with special needs or disabilities.

3. Accountability

- Youth ministry leaders are accountable to the pastor or other duly appointed representative, under the authority of the (arch)diocesan (arch)bishop.
- Youth ministry leaders are called to serve the faith community, carrying out their ministerial functions "... conscientiously, zealously, and diligently" (§ 231, Code of Canon Law).
- Youth ministry leaders exercise responsible stewardship of resources while holding themselves to the highest standards of integrity regarding the fiscal matters placed in their trust.
- Youth ministry leaders, upon suspecting or learning of abuse of a minor, must notify the civil authorities, as well as church leadership responsible for this topic, in accordance with civil and ecclesial law.

**Code of Ethics for Youth
Ministry Leaders**

4. Confidentiality

- Youth ministry leaders respect confidentiality, yet are not held to confidentiality in the same way as ordained ministers and licensed, certified counselors.
- Youth ministry leaders adhere to civil and ecclesial law concerning the reporting of neglect, abuse or when physical harm could come to the person or to a third party.
- Youth ministry leaders support the rights and roles of parents while ministering to the needs and concerns of their children.

5. Conduct

- Youth ministry leaders know that they have considerable personal power because of their ministerial position. Therefore, they will sustain respectful ministerial relationships, avoiding manipulation and other abuses of power.
- Youth ministry leaders maintain appropriate professional boundaries (e.g., physical, sexual, spiritual, relational, and emotional). Romantic, dating, or sexual relationships between a youth ministry leader and any youth is inappropriate and unethical.
- Youth ministry leaders shall exhibit the highest ethical standards and personal integrity reflective of the Gospel and will avoid even the appearance of impropriety.
- Youth ministry leaders may not use alcohol while supervising youth; may never use illicit substances; and, may never provide alcohol or illicit substances to youth.

6. Referrals and Intervention

- Youth ministry leaders know the signs of neglect and physical, sexual, and psychological abuse. Youth ministry leaders know their limitations with respect to paraprofessional counseling and make appropriate referrals.

7. Parish/Diocesan Policies

- Youth ministry leaders know of and comply with all applicable parish, organizational and/or diocesan policies with special attention to sexual misconduct, safe Environment, risk management, safety, transportation, parental permission, and medical emergency policies.

I have read and understand the above code of ethics and commit to uphold this code in my ministry.

Signature: _____ Date: _____

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Code of Ethics for Youth Ministry Leaders



Archdiocese of San Francisco

Driver Information Form - Questions

All Questions Must be Answered Yes or No. If No, please explain in area below.

Driver Name: _____

I am at least 25 years of age and have regularly driven automobiles for the past 5 years. Yes _____
No _____

I possess a valid, unrestricted (except for corrective lenses) California Drivers License and have attached a photocopy. Yes _____ No _____

In the past eight years, I have **not** been convicted* of any of the following. Circle offenses where a conviction occurred, otherwise leave blank. Yes ___ No _____

Any offense involving alcohol or drugs (e.g. DUI/Drugs, open container, etc.)

Negligent, Careless, or Reckless Driving

Evading a peace officer

Speed contest or exhibition of speed

Hit and Run

Speeding more than 20 mph over posted limit

Failure to stop at a stop sign or signal

Any felony charge involving a motor vehicle

Driving with a suspended or revoked license

Vehicular manslaughter

Driving on the wrong side of the road

In the past four years, I have **not been convicted*** for more than one moving

Yes _____ No _____

* Convicted includes all convictions and/or related traffic school attendances.

2 Vehicle:

N/A { The vehicle I will drive is registered to me. Yes ___ No ___

I have liability insurance as required by law on the vehicle I will drive.

Yes ___ No ___

My vehicle is, to the best of my knowledge, in good mechanical condition.

Yes ___ No ___

Explanation :

I WILL DRIVE SAFELY AND FOLLOW ALL ARCHDIOCESAN POLICIES.

SIGNATURE **DATE**

* Please include photo copy of your
Drivers License



Code of Conduct: Chaperons

I agree to be responsible and provide adult supervision for the children.

I agree to follow the requirements of the *SF Archdiocese Safe Environment Program*, a copy of which has been provided to me.

I agree to be a good role model in my interactions with children and adults at this event by:

Dressing appropriately

Not consuming alcohol

Not smoking

Not using illegal drugs

Not possessing a weapon

Being respectful to all children, adults and others and their property that I may encounter on this trip.

Only using cell phones and other electronic equipment during appropriate times and places

I have read and understand this Agreement and agree to perform my obligations as set forth above.

Signature

Print Name



Archdiocese of San Francisco

Adult Release and Waiver Form

ACTIVITY Mexico Mission Trip w/ AMOR ministers
JUNE

(Describe in detail; include transportation)

PARISH/SCHOOL:

NAME:

ADDRESS:

PERSON(S) (OTHER THAN PARENT) TO NOTIFY IN CASE OF EMERGENCY:

NAME:

PHONE:

RELEASE AND WAIVER OF LIABILITY:

In consideration of my participation in the activity described and on behalf of my heirs, executors, administrators and next of kin, I hereby release, covenant not to sue and forever discharge the Released Parties (as defined below) of and from all liabilities, claims, actions, damages, costs and expenses of any nature arising out of or related to, or in any way connected with my participation in the activity and/or any such related or associated activities, and further agree to indemnify and hold each of the released parties harmless from and against any and all liabilities, claims, actions, damages, costs and expenses including by way of example, but not limited to, all attorneys' fees, costs of court and the cost and expense of other professionals and disbursements up through and including any appeal. I, for myself, understand that this Release and indemnity includes any claims based on the negligence, action or inaction of any of the Released Parties and covers bodily injury, including, without limitation, death, property damage, and the loss by theft or otherwise, whether suffered by me during or after such participation. For the purposes hereof, the "RELEASED PARTIES" are:

The Roman Catholic Archbishop of San Francisco, a Corporation sole

(Parish/School/Organization)

their respective parent, subsidiary, affiliated or related companies and the officers, directors, employees, agents, representatives, successors, assigns, and volunteers for each of the foregoing entities.

I am not aware of any medical condition I have which would render it inappropriate for me to participate in any such activity.

This Release and Waiver shall be governed by the laws of the State of California and any legal action related to or arising out of this Release and Waiver shall be commenced exclusively in the Superior Court in and for San Francisco County, California, and I specifically waive the right of trial by jury for myself. I certify I am eighteen (18) years of age or older.

Photograph and Video Consent

From time to time, we take pictures and video of Religious Education and Youth Ministry events and gatherings. We would like to be able to use these photographs and videos for flyers, parish and diocesan publications, and the ministry website. To do this, we need your consent. If there are concerns about pictures/videos posted on the website, please contact the webmaster and they will be promptly removed.

I HAVE READ, UNDERSTOOD AND ACCEPT THE CONDITIONS OF THIS RELEASE AND WAIVER FORM, INDEMNITY AND PROMISE NOT TO SUE. SIGNATURE: DATE:

THE ARCHDIOCESE OF SAN FRANCISCO

**WAIVER AND RELEASE FORM
RELATING TO INDIVIDUALS 18 AND OLDER**

ACTIVITY (Describe in detail, including transportation): MEXICO MISSION TRIP
w/ AMOR Ministries - Vans Driven by adult volunteers

DATE AND PLACE: June
Tijuana, Mexico

PARISH: St. Charles Parish - San Carlos

I wish to participate in the activity described above, and as a condition of my being allowed to do so, I hereby, to the extent permitted by law, release and discharge the Archdiocese of San Francisco, its constituent organizations, including but not limited to (Name of Parish) St. Charles, and their officers, agents, and employees, from any and all claims for personal injuries or property damage that I may suffer as a result of any participation in the activity described above, including but not limited to any transportation to and from the event, whether or not such injuries or damage are caused by the negligence (active or passive), of any of the entities or individuals named or described herein.

This Waiver and Release is intended to release and discharge in advance the promoters, sponsors, officials, leaders, and THE ROMAN CATHOLIC ARCHBISHOP OF SAN FRANCISCO, A CORPORATION SOLE, and (Parish/Agency) St. Charles and their officers, agents, and employees (The Archdiocese) from any and all liability, except for that attributable to willful misconduct, arising out of or connected in any way with my participation in the event.

I hereby warrant and represent that I am physically fit and capable of taking part in such activity. I make this warranty and representation on the basis of advice given me by a duly licensed medical doctor within the last year, and I know of no change in my medical condition since receiving such advice that would affect the opinion of said medical doctor.

I agree to abide by the rules and regulations governing the above-described activity and to obey any instructions given by the person or persons having supervision and control over the activity.

I hereby authorize, without compensation, the making of photographs, motion pictures, video tapes, recordings, or other memorializing of said event and my participation therein, and the publication or other uses thereof.

I warrant and represent that I am eighteen (18) years of age, or over, and upon request will produce satisfactory proof of such fact.

Signed this _____ day of _____, 20____.

(Print Participant's Name)

(Participant's Signature)

Archdiocese Requirements for Adult Chaperones 18 and over

~ Shield the Vulnerable Protect Children Course Code 706 & Live Scan

If you have not completed this on-line course you must go to the web site, establish a log-in and password and complete the training. Evidence of your training is a certificate that is printed at the end of the session.

- a. Go to <http://www.shieldthevulnerable.com>
- b. Use your legal name - listed on your driver's license.
- c. Please be sure than when you log in you register yourself as from the "**St. Charles SMO**" parish **NOT** the "St. Charles Borromeo" parish (this one is a San Francisco church – not our church). If you choose the wrong parish code you will not appear in our database.
- d. Make sure you choose "overnight chaperone"
- e. A certificate prints at the end of the training
- f. The system will also automatically print a Live Scan form which you will take along with your driver's license to the UPS Store located at 951 Old County Road in Belmont. Their hours are 8:00-6:30 Monday thru Friday and 9:00-3:30 on Saturdays. No appointment is necessary but I do suggest you call 650-598-9611 ahead to verify that the machine is up and running and the live scan operator in onsite.
- g. Please turn in a copy of your Shield The Vulnerable Certificate, your Live Scan Receipt along with a printed copy of the completed live scan form to Diana Bradley at the Parish office for reimbursement.

If you have taken the Shield The Vulnerable Course longer than 3 years ago please login into your account at <http://www.shieldthevulnerable.com> and renew your course.

If you have taken a Live Scan for St. Charles or within the San Francisco Archdiocese you have fulfilled the Live Scan Requirement.

~Archdiocese of San Francisco Code of Ethics for Youth Ministry Leaders

~Waiver and Release form Relating to Individuals 18 and older

~Code of Conduct: Chaperones

~Adult Release and Waiver Form

~ Medical Information

~Medical Release - Adult

~Driver Information Form – Questions (only for those driving during the trip)