



# U.M. ARMY-Texas Conference INDIVIDUAL REGISTRATION FORM

Please Print

Form 06-10T

Revised 8-08

<input type="checkbox"/> <b>HIGH SCHOOL Work Camp</b> <small>All Youth Must Have <b>Completed</b> Grade 9 &amp; older</small>	<input type="checkbox"/> <b>CHRISTMAS BREAK Work Camp</b> <small>Currently in grades 9-12 &amp; older</small>	<input type="checkbox"/> <b>Youth</b> <small>Grade (Circle One)</small> <div style="display: flex; justify-content: space-around;"> <span>9</span> <span>10</span> <span>11</span> <span>12</span> </div>
<input type="checkbox"/> <b>COLLEGE Work Camp</b> <small>One full year out of high school and older</small>	<input type="checkbox"/> <b>SPRING BREAK Work Camp</b> <small>Currently in grades 9-12 &amp; older</small>	<input type="checkbox"/> <b>Young Adult</b>  <input type="checkbox"/> <b>Adult</b>

Last Name	First Name	Preferred Name	<i>Circle One</i> Male Female	Age	Birth Date
Street Address	City, State & ZIP		Home Phone # (10 digit)		
Parents Name(s)-(H.S. students only)	Parent's Cell Phone (10 digit)		Your Cell Phone (10 digit)		
Email address	Emergency Contact		Emergency Phone # (10 digit)		
Participating Church	City	Name of Church Contact			

Type of Vehicle You Will Drive at Camp (Age 21 & Older)	# Seatbelts	T Shirt Size <i>Circle One</i>	<b>S</b>	<b>M</b>	<b>L</b>	<b>XL</b>	<b>2XL</b>	<b>3XL</b>
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List All Medical Conditions, include Allergies	List All Medications That Will Be Taken At Camp
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**Include Additional Information Sheet If Necessary for Medical Conditions or Medications**

Have You Attended U.M. ARMY?	# of Times?	Last Year Attended	ADULTS: <b>Circle</b> Past Exp. <b>Check</b> The One You Want	Director	Programs	Admin.	Kitchen	Safety
Anything We Should Know About You?				Sites	Tools	Color Group Leader	Work Team Adult	None

<b>Medical Insurance Information</b>		List First And Last Names Of Other Family Members Attending This Work Camp	List Any Special Dietary Needs Including <b>Food Allergies</b>
Insurance Company Name			
Policy Holder			
Group Number			
Insurance Company Verification Phone #			

**SAFE SANCTUARY APPROVED, MUST BE CHECKED BY CHURCH COORDINATOR**

**Covenant Agreement / Release Form**

By my signature below I acknowledge that I have read and understand the U.M. ARMY Covenant of Conduct on the back of this form and agree to abide by it. I have also read and agree to the Press and Medical Release terms on the back of this form.

**I affirm that all the information on this U.M. ARMY Individual Registration form is correct.**

<b>X</b> _____ <b>X</b> _____	<b>X</b> _____ <b>X</b> _____
<b>Participant's Signature</b> <small>(youth / young adult / adult)</small>	<b>Parent/Legal Guardian Signature</b> <small>(required for all participants 17 and under)</small>

MAKE A COPY FOR YOUR RECORDS, THEN RETURN ORIGINAL TO YOUR **Church Coordinator**

**Church Coordinator:** MAIL ALL FORMS WITH FINAL PAYMENT TO:

**U.M. ARMY-Texas Conference PO Box 590103 Houston, TX 77259-0103**

Questions? Contact Phyllis or David: 281-479-0103; phyllis@umarmytx.org; david@umarmytx.org

# U.M. ARMY

## Press & Medical Release

1. I authorize any of the leaders of U.M. ARMY to obtain any and all necessary medical or dental attention and/or treatment for me, including surgical procedure if advised by the attending physician. I have listed on the registration form (front side), any and all special medical problems concerning myself, and I confirm that I have advised the leaders of U.M. ARMY of any special medical problems.
2. I fully release, discharge, and waive any claim or right of action which I have or might later have arising from any negligent acts or omission of U.M. ARMY, any of its employees, agents, or any of the adult leaders arising out of any activity associated with U.M. ARMY.
3. I agree to indemnify and hold harmless U.M. ARMY, its employees, agents and leaders for damages resulting from negligent or intentional acts committed by myself.
4. I authorize publication or broadcast of my image in any press release and or media publication arising out of any activity associated with U.M. ARMY.
5. I understand that travel between home and camp is my responsibility, and I will not hold U.M. ARMY responsible for accidents or injury related to travel to and from the work camp.

## U.M. ARMY

### Covenant of Conduct

*The intent of this covenant is to ensure the integrity and dignity of U.M. ARMY, its participants and clients.*

- I will treat both the client and their property with dignity and respect.
- I will treat all participants respectfully in accordance with the teachings of Christ. As a **Christian Role Model**, I will encourage all volunteers to assume leadership roles and to conduct themselves with a Christ-like attitude. I will seek to build them up and not tear them down.
- I will show proper respect for the host church, vehicles and tools. I will conduct myself in a thoughtful, safe manner at work and at play.
- I will participate fully in **all** camp activities and with a **positive attitude** will focus my energies to promote unity within the camp.
- I will abide by the following vehicle regulations:
  - Seatbelts to be worn at all times
  - No youth may ride in a vehicle driven by anyone under 21 years of age
  - No riding in pickup truck beds or trailers
- I recognize I will be relied upon to provide leadership especially at times when safety and issues of discipline are being compromised.
- I will adhere to the following rules and regulations established by U.M. ARMY:
  - All personal electronic equipment including, ipods, gaming devices, & cell phones are not to be used by youth while at the work camp
  - Alcohol, illegal drugs and tobacco products are not permitted
  - No one may enter the dorm of the opposite sex
  - Everyone must dress appropriately
- I will read all U.M. ARMY camper information literature and will abide by and adhere to all that is printed within.