PARENTAL CONSENT FOR MINORS (age 17 and under)

One form per Minor.

Consent From AND the Medical Information Form both must be turned in before Minor may attend.

PACIFIC YEARLY MEETING OF THE RELIGIOUS SOCIETY OF FRIENDS

EVENT: PYM Annual Session, July 12-17, 2019 at Walker Creek Ranch, Petaluma, CA, USA

PERMISSION TO ATTEND

I/We, the undersigned parent(s) or person(s) having legal custody/guardianship of ________________________ (“Minor”), give permission for this Minor to attend the activity of Pacific Yearly Meeting of the Religious Society of Friends (PYM) for the Event, dates, and location noted herein:

SIGNATURES

Date

SPONSORSHIP PERMISSION

I/We authorize the adult(s) named below (“Sponsor”), if any, to act as my surrogate in taking responsibility for Minor during this PYM Event when I/we will not be in attendance. This includes any situation --medical, behavioral, or otherwise-- in which Minor may need to or be asked to leave the Event or the program or activities organized for minors within the Event.

Sponsor Signatures (if applicable): I will be 18 years of age or older as of the first day of this Event and will be attending this Event at the same time as this Minor. I agree to accept the responsibility of sponsorship described herein and in the PYM Child Abuse Prevention Policy at this link (also found under the “Youth” tab on the website menu):

PARENT OR LEGAL GUARDIAN SIGNATURES

The undersigned agrees to hold PYM and its officers, agents, teachers, and other personnel harmless of any claim by the undersigned arising out of any medical treatment given by or attempted in connection with any medical emergency. These authorizations shall remain effective for the entire Event unless revoked in writing delivered to said Agent(s).

Circle relationship: Parent / Legal guardian / Person having legal custody

Parent/Guardian Name Parent/Guardian’s Signature Date

(Minors Parental rev. 4/19)
MINOR’S MEDICAL HISTORY & INFORMATION

Please fill out this form in ink, one form per Minor. Add pages if needed. This AND the permission form are both needed for Minor to participate.

EVENT: PYM Annual Session 2019

Minor’s Legal Name: ____________________________ Birth Date (MM/DD/YY): __/__/___
Nickname (if applicable): ________________________ Pronouns (e.g., they, she, he…): ______
Medications, dosage and schedule: ____________________________

Does program staff need to oversee taking of medication? ______________

Is Minor currently under treatment for depression, anxiety, mental health, or physical conditions? If so, please include any specific tips or requests on how we can help support them during the event: ____________________________

Other information or condition: __________________________________________

MEDICAL HISTORY/CONCERNS:

Date of last tetanus shot __________________________
Allergies__________________________________________

Name of Minor’s Doctor ____________________________ Dr.’s Phone_____________________
Medical Insurance Company __________________________ Policy holder’s name ____________
Group # ____________________________ ID # ____________________________ Policy # ____________
If an HMO, please give name and telephone # ____________________________
** Please have Minor bring a photocopy of health insurance card with them.

PARENT/GUARDIAN & SPONSOR CONTACTS:

Parent 1/Guardian ____________________________ Phone & type_____________________
Parent 2/Guardian ____________________________ Phone & type_____________________
Sponsor 1 ____________________________ Phone & type_____________________
Sponsor 2 ____________________________ Phone & type_____________________

EMERGENCY CONTACT In case you cannot be reached in an emergency:

Name ____________________________ Relationship ____________________ Phone(s)____________

SIGNATURE: Completed by:

__________________________ ____________________________
Parent/Guardian Name Parent/Guardian’s Signature Date
Pacific Yearly Meeting of the Religious Society of Friends

-- For teen program only --

Junior Yearly Meeting 2019
“Respectful Relationships” Sexuality Education Parental Consent Form

JYM, like the Our Whole Lives (OWL) curriculum, affirms that parents/guardians are the primary sexuality educators of their children. Therefore, your signature is requested on this consent form to opt in or out of this session.

I have read the Document “What to expect for parents and sponsors of teens” found at pacificyearlymeeting.org/youth/jym/ and understand I may contact the JYM Adult Committee with any questions.

I [DO] or [DON’T] (circle one) give permission for my child, ___________________________________________, to participate in the JYM Respectful Relationships sexuality education sessions.

Parent/Guardian’s Name  Parent/Guardian’s Signature  Date

Background:

While optional, Respectful Relationships has received some of the highest ratings from JYM participants on their evaluations, and we hope parents/guardians will support their child’s participation. A subcommittee of PYM’s Ministry & Oversight Committee supports JYM in this work. We incorporate some materials from the Our Whole Lives, Sexuality and Our Faith (OWL) curriculum that was created by the Unitarian Universalist Association and the United Church of Christ.

OWL’s assumptions and values of “self-worth, sexual health, responsibility, and justice and inclusivity” align well with PYM Friends’ beliefs. Sexuality is defined in OWL as “a good part of the human experience” and “much more than sexual behavior.”

Goals of OWL and JYM Respectful Relationships:

- To provide accurate information that young people need about sexuality. We believe that accurate information is essential, especially for young adults, and that holding back knowledge will hinder healthy sexual development.
- To provide a forum in which all questions are legitimate and appropriate.
- To provide learning about sexuality issues that goes beyond just factual information and that will be useful throughout participants’ lives.
- To help participants to develop the skills necessary to make good decisions that will allow for a healthy, satisfying life.

Please note that JYM’s Respectful Relationships is not a full OWL program, nor will it adhere only to OWL materials. If you are interested in the more in-depth OWL version, we encourage you to see if OWL is offered in your community, perhaps in a local UU or UCC church. More information about OWL can be found at:

- ucc.org/justice/sexuality-education/our-whole-lives.html
- uua.org/re/owl/