

Iowa Alateen Consents and Release ages 12-19

_____ **Serenity Weekend/Assembly**
(w/o parent/guardian)
Entire form

_____ **Serenity Weekend/Assembly**
(w/parent guardian)
contact, behavior, waiver

_____ **Transportation**
Entire form

Alateen name _____ Age _____ Minor _____ or 18/19 yrs _____

Address _____ Phone _____

Parent/Guardian _____ Phone(s) _____

Emergency Contact Name _____ Phone _____

BEHAVIOR We have read and agree to follow the Iowa Area Alateen, Camp, Hotel, Safety and Behavior Guidelines. (see other side). Failure to abide by the rules and regulations of this activity will result in termination of participation; any travel expense or any damage repair cost is the sole responsibility of the parent/guardian if minor, participant if 18 or older.

Parent/Guardian (sign) _____ Alateen _____

I give permission for my child to receive medication from the onsite nurse. (Serenity Weekend only) yes / no
All medication must be given to the nurse upon arrival.

List any medications, allergies

Parent/Guardian (sign) _____

WAIVER As the Alateen member (adult) or parent/guardian of the Alateen member (minor), I hereby release Al-Anon Family Groups, its agents, volunteers and employees from all liability, loss, cost, claim, or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parent/guardian.

The adult Alateen member or the parent/guardian of the minor Alateen member is responsible for payment of any medical services required and obtained on the Alateen member's behalf. I further hold harmless the sponsors of the event attended by my child, should any harm come to my child as a result of his/her participation in this activity or procurement of medical treatment.

Legal Guardian (sign) _____ Alateen _____
(if 18/19 yrs)

INSURANCE Information: Company _____ Policy number _____

_____ 1 event date _____

_____ 1 year (dates) _____ to _____

TRANSPORTATION- (who is driving, check one)

___ Alateen (keys must be turned in to AMIAS upon arrival) ___ Parent/Guardian

___ AMIAS (Al-Anon Member Involved in Alateen Service) Other _____