

Walk On Water Ministries, NFP

EIN: 20-1192096

17623 Ford Rd.
Geneseo, IL. 61254-8787
Phone: (309) 944-3957 or 507-0781
Fax: (309) 944-1427
Email: wow4god@geneseo.net

Onward to the Appellation Mountains !!

Participant's name: _____

(Please PRINT) (First, Middle Initial & Last)

Birth date: _____ Age: _____ Sex: _____ Church _____

(Must be going into 9th grade or older to participate, please!)

Participant's Email: _____ Cell #: _____

Parent/Guardian's Email(s): _____

Home address: _____

City, State & Zip _____

Home Phone: _____

Parent's Cell phone: _____ Parent's Work #: _____

I, _____, grant permission for my child,

(PRINTED Parent or guardian's name _____)

(PRINTED Participant's name)

to participate in the Walk On Water Ministries Mission Work Trip to Salyersville, Kentucky with the Salyersville First Baptist Church Mission.

Email, Address & phone for emergencies are:

matthewgullion@salyersvillefbc.com; 134 Dixie Ave, Salyersville, Kentucky;
Phone: (606) 349-6276. I understand that these activities will take place under the guidance and direction of the Salyersville First Baptist Church; Bob & Lori Ward, Co-founders of Walk On Water Ministries, and adult volunteers from various churches.

(Each group must try to supply 1 adult for every 8 teens or make arrangements with WOW Ministries to see if we have extra adults going.)

I understand the risks such activities present to my child, including, but not limited to

serious personal injury or death. Any questions I have concerning these activities have been asked & answered. As parent and/or legal guardian, I remain legally responsible

PARTICIPANTS CODE OF CONDUCT AGREEMENT

I, _____, agree to abide by all rules and regulations set forth by the states of Illinois, Kentucky and the United States of America, as well as those set before me by the leaders/volunteers of the activities I take part in with the WOW Ministries/Salyersville First Baptist Church Mission Trip Group. I understand that I may be sent home (at my own and/or parent's expense) if my conduct is not appropriate.

Signature of Participant

Date

As parent of this student, I agree to the code of conduct agreement listed above.

Signature of Parent/Guardian

Date

Publicity Form

On occasion, WOW Ministries and/or Bob & Lori Ward takes photographs or makes an audio or video tape recording of the participants involved in Mission Trip activities. Such photographs or video recordings may be used by staff and participants to remember the activities and/or participants. In addition, such photographs and audio/visual recordings may be used in Walk On Water Ministries' web page, publications or advertising materials to let others know about our Mission Trips. In addition, local news organizations may hear of our activities or events, and WOW Ministries may invite or allow them to photograph or record our events to be used, distributed or displayed as agents of WOW Ministries see fit. This consent includes but is not limited to: photographs, videotape, webpage and audio recordings.

Signature of Parent/Guardian

Date

Signature of Participant

Date

Suggested Packing List

PLEASE LABEL ALL ITEMS ~ towel, camera, purse, backpack, IPOD, bag, items of clothing, toothbrush, everything you bring ~ it is SO easy to lose things.

IMPORTANT: Do not pack anything in your suitcase that you might want to have on the bus. Pack a backpack or small duffel bag (labeled with your name ☺) small enough to put in the overhead area or under your seat on the bus. (We need to keep the seats as empty and comfy as possible) Here are some items you will want to have on the bus: blanket, 'fave' pillow, a FEW snacks, medicines, money, toothbrush, contact stuff, etc.!

DRESS IN LAYERS FOR THE BUS! (It might be cold or get very hot).

****** PACK LIGHT to save space, please! ******

(See below for items provided for all)

- Medications in original prescription bottles.
 - Twin air mattress ONLY — no doubles, please!
 - Sleeping bag or sheets & blankets, & your 'fave' pillow (might be cold)
 - One outfit for each day - old shorts & t-shirts for working.
 - Shorts, jeans & t-shirts for daily relaxing time (Dress MODESTLY!)
 - Some bring their 'God shirts' to wear as a witness.
 - 2 sets of jeans and sweatshirts if we have cool nights
 - P.J.'s, undergarments & socks. Rain gear is optional. Sunglasses and hat, if desired
 - Contacts, contact solution, glasses ~ if needed
 - Snacks to share, for bus & in Kentucky, & even frozen ones to bake &/or eat there are appreciated! PARENTS: Anything food-wise to help with dinners (Prepared casseroles or desserts?) Call Lori if you are able to help ... you can be reimbursed if desired.
 - Hair dryers, curling irons, etc. **aren't** needed: We can share if needed
 - Travel size toiletries (toothbrush, paste, make up, razors, deodorant, lotions, feminine products, face wash, etc.)
 - Sturdy working shoes—ones that can get ruined. Comfy shoes for other times.
 - Flip flops for showers if desired. (Please label shoes, too ~ we don't need a million pairs of shoes to trip over!!)
 - Camera and film—please remember to label them! (If digital—bring cords and blank disks to copy to Lori's laptop and your disk to share at nights if we have time.)
 - Flashlight for finding bathrooms at night; alarm clock (or use alarm on cell phone)
 - Two towels and a wash cloth for showering
 - Swimsuit in case there is swimming available --- modest suits for all! (Or cover up!)
 - Phone Calling Card —Cell phones might not get service.
 - ** (Cell phones are for use to call family **briefly** only – NOT texting or calling friends!)
 - Spending money (around \$50.00 or more. (\$5.00/fast food stops are included in fee)
 - Your own Bible if you want it with you
- IMPORTANT:** Bring your sense of humor, positive & giving attitude, willingness to work hard & be Christ's hands, feet, ears & heart for everyone there!

Essentials We Will Provide: Drinks for the bus (water, juice and pop). Electric inflators for air mattresses; soap & shampoo for showers and bathrooms, extra toiletries & towels in case you forget yours, mattress patch kits and a few extra mattresses in case yours goes flat, 1st Aid kits, etc.

First aid kits provided: Including Sunscreen; Tylenol; Advil; Cold & Allergy medicines; Pepto Bismol; Ace wraps, peroxide, Band Aids, Triple Anti-biotic, Cortisone, Sunburn Aloe relief, Bug Spray; Anti- bacterial gel, etc.

for any personal actions taken by the above named minor ("participant"). In consideration for my child being allowed to participate in this activity, I hereby RELEASE AND AGREE TO INDEMNIFY AND HOLD HARMLESS Salyersville First Baptist Church & Walk On Water Ministries, NFP; and the volunteers assisting those Ministries from any and all liability for injuries, damages, medical expenses, or any other loss to my child or family or me (including attorneys' fees) arising from or related to my child's participation in this activity.

Signature of Parent/Guardian Signature of Parent/Guardian Date

Signature of Participant (if 18) Date

Authorization for Emergency Medical Treatment

This information will be kept in the possession of Walk On Water Ministries' home office and a copy distributed to the person in charge of the medical forms on the Mission Trip. Should the need arise, this information will be given to the proper medical authorities.

I, _____ understand that in the case of illness of my
(Print Name of Parent/Guardian)

child, _____ (Print Name of Participant), WOW Ministries' and/or Salyersville First Baptist Church personnel and/or volunteers will try to notify me or the person I have listed as an emergency contact. In case of medical emergency concerning my child, at a time when my listed emergency contact or I cannot be notified, I grant full power to the supervising employee to do as follows:

Arrange for the transportation of my child, whether by ambulance or otherwise, to a proper facility where emergency medical treatment would normally be administered, including but not limited to, an emergency room of a hospital, a doctor's office, or a medical clinic; and sign releases as may be required in order to obtain any medical or surgical treatment as is required in the judgment of medical authorities at the facility.

***** This page must be signed in front of a Notary Public!**

Signature of Parent/Guardian/or Adult Participant Date

STATE OF _____)

COUNTY OF _____) ss.

SIGNED AND SEALED before me this

_____ day of _____, 20____

NOTARY PUBLIC SIGNATURE

MEDICAL INFORMATION

PRINT Student/Minor's Name: (or yourself, if 18 or older): **Participant's Name:**

First M.I. Last Birth date

Address: _____

Emergency Contacts: _____

Parent(s) or Guardian Name (first, middle initial, last):

Phone (including area code): Cell phone (if available):

Other Contact Name (first, m.i., last): _____

Relationship (friend, relative, neighbor, etc.) _____

Phone (including area code): Cell phone (if available):

Participant's Regular Physician: _____

PRINT Name (first, middle I, last):

Physician's Phone (including area code):

Medical Conditions:

Please list any medical conditions of the above participant; (asthma, diabetes, epilepsy, etc.):

Please list any food allergies or allergic reactions to medications of participant:

Please list any medications the above participant is now taking:

***** If Participant is a minor, do you give permission for them to be in charge of their own medicine, or request an adult leader handle that for your child? (We will distribute meds at appropriate times and dosages).**

Date of participant's most recent tetanus shot: ** This must be up to date! **

Other pertinent medical information:

Does the participant require a special diet? If so, what? (Be specific, please):

Any Special food needs? _____

Medical Insurance Information:

Company: _____

Identification number of plan: _____

Identification number of covered employee: _____

Phone number of insurance company: _____

Address of insurance company: _____

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**Salyersville First Baptist Church Kentucky Mission Trip
to the Appellation Mountains Aug. 8-15th**

Walk On Water Ministries, NFP



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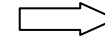
*** THIS WAIVER IS FOR WALK ON WATER
MINISTRIES & Salyersville First Baptist Church of
KENTUCKY ONLY. YOUR CHURCH MAY REQUIRE A
SEPARATE WAIVER/PERMISSION FORM.

(If 8 or more teens are going from your group, you must supply 1 adult for every 8 teens or make arrangements with us to see if we have extra adults).

For High School age (those going into 9th grade) and older only, please. Those 18 and older need to have a background/fingerprint check.

INSERTS INCLUDED:

- *APPLICATION AND PERMISSION FORMS
- *MEDICAL RELEASE BY PARENT/GUARDIAN
- *PARTICIPANT'S MEDICAL INFORMATION
- *ACCIDENT/INJURY WAIVER



FORMS MUST BE SIGNED BY PARENTS
&
NOTARIZED BY A QUALIFIED NOTARY PUBLIC



SEND COMPLETED & SIGNED FORMS ALONG
WITH \$400.00 Fee to WOW Ministries, NFP.

TRIP DATES & MONEY DUE DATES: AUG. 8th -

15th July 10 \$150 first down payment due
July 20 \$150 second payment due
August 1 \$100 final payment due

(Adults are free, but donations to help with food and fuel are appreciated if you are able)