



# Rocky Mountain Mission MERCI Forms

(Medical, Emergency, Release, Covenant, Information)

## Information

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ School/Grade: \_\_\_\_\_  
Participant Email: \_\_\_\_\_ Participant Cell: \_\_\_\_\_

Caregiver #1 Name: \_\_\_\_\_ C#2 Name: \_\_\_\_\_  
Caregiver #1 Relation: \_\_\_\_\_ C#2 Relation: \_\_\_\_\_  
Caregiver #1 Cell: \_\_\_\_\_ C#2 Cell: \_\_\_\_\_  
C#1 Email: \_\_\_\_\_ C#2 Email: \_\_\_\_\_

## Emergency

Emergency Contact #1: \_\_\_\_\_ E Contact #2: \_\_\_\_\_  
Emergency #1 Relation: \_\_\_\_\_ E #2 Relation: \_\_\_\_\_  
Emer #1 Phone: \_\_\_\_\_ E #2 Phone: \_\_\_\_\_  
Emer #1 Address: \_\_\_\_\_ E #2 Address: \_\_\_\_\_  
Med. Insurance Company: \_\_\_\_\_ Insurance Phone: \_\_\_\_\_  
Group #: \_\_\_\_\_ Policy #: \_\_\_\_\_

## Medical History

Allergies & Reactions: \_\_\_\_\_  
\_\_\_\_\_

List All Medication & Instructions: \_\_\_\_\_  
\_\_\_\_\_

Medical Restrictions: \_\_\_\_\_  
\_\_\_\_\_

Additional Physical/Emotional/Dietary Concerns: \_\_\_\_\_  
\_\_\_\_\_

RMM requires that your own group leaders administer all medications, excepting when the leaders are unavailable. Please cross out any medications that should **NOT** be given to the participant (your child) at any time.

Acetaminophen (Tylenol)  
Diphenhydramine antihistamine (Benadryl)  
Guaifenesin cough syrup (Robitussin)  
Sore throat spray (Chloraceptic)  
Antibiotic cream  
Calamine lotion  
Laxatives for constipation (Ex-Lax)  
Tums/Milk of Magnesia/Immodium

Ibuprofen (Advil, Motrin)  
Pseudoephedrine decongestant (Sudafed)  
Dextromethorphan cough syrup (Robitussin DM)  
Generic cough drops  
Benadryl cream  
Cortaid  
Bismuth subsalicylate (Kaopectate, Pepto-Bismol)  
Latex bandages

Any other over-the-counter medicines **NOT** to give:



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### Release of Permission & Liability

- I understand that safety is very important to Nederland Community Presbyterian Church, Rocky Mountain Mission, and its Ministry staff and volunteers. I also understand that perfect safety cannot be assured in our world or at ministry events.
- I give permission to for my child (or myself) to participate in all activities, retreats and events of the RMM program. I acknowledge further that s/he (or myself, as an adult participant) is in good health, under no activity restrictions that are not discussed above.
- I give permission for my child to travel to and from ministry events with NCPC/RMM staff and volunteers.
- I give my permission for the photos taken of me or my child participating in ministry activities to be used for fellowship and promotional purposes by RMM/NCPC. [Initial if you do NOT agree? \_\_\_\_\_]
- I agree to hold harmless NCPC/RMM, its staff and volunteers, from any and all liability for injury, damage or loss of life from participating in ministry events.
- In the event of sickness or injury at ministry events, your own group leaders are expected to offer first aid. If they are unavailable in a time-critical situation, I give permission to NCPC/RMM staff and volunteers to offer necessary medical attention for my child, whether that be band aids, OTC medication or CPR. In the event of a medical emergency needing hospital attention, I authorize doctors to perform any treatment and emergency procedures, in consultation with the NCPC/RMM staff and volunteers.
- I understand that a child's behavior can significantly disrupt ministry events, and that staff and advisors may need to minister to the behavioral issues of my child. If my child's behavior at a ministry event is unacceptable, I assume responsibility for returning them home immediately.
- Should there be any change of family, emergency or medical information, I promise to update NCPC.

Caregiver/Adult: \_\_\_\_\_

Date: \_\_\_\_\_

### Covenant

- As part of a caring community, I will include and support all people in Nederland Community Presbyterian Church, Rocky Mountain Mission, and any group with whom they work in ministry.
- I will participate in positive ways, challenging myself individually, rejoicing in group success, and comforting others in our mutual weaknesses.
- I will not behave in any way that disrespects or threatens the value, spirit or peace of myself, others or the group. I will not use violence, coarse language, cruelty, alcohol, marijuana, or illegal drugs.
- I will follow directions and rules established by the leaders and in the RMM Welcome Packet.
- I will strive to grow in my relationship with God.

Participant: \_\_\_\_\_

Date: \_\_\_\_\_

- I will plan physically and emotionally safe activities, engage in safe practices (in ministry and travel), and prepare advisors to serve safely.
- I will do everything I can to support, minister to and love the young people on this mission trip.
- I will strive to grow in my own relationship with God.

NCPC Pastor: \_\_\_\_\_

Date: \_\_\_\_\_

RMM Coordinator: \_\_\_\_\_

Date: \_\_\_\_\_

If you have any special concerns with any of these bullet points, please describe below.