

## CCBA Mission Trip Youth Consent Form

### FOR 10-17\*\* YEAR OLDS

**Deadline to register is May 16, 2025**

Youth Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: M F

Address: \_\_\_\_\_

Parents/Guardians

Name/Relation: \_\_\_\_\_ / \_\_\_\_\_

Name/Relation: \_\_\_\_\_ / \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact #1 (if different than above) \_\_\_\_\_

Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

I give permission for my youth, \_\_\_\_\_, to participate in the mission trip to Western North Carolina, Indiana, being planned by the Coffee Creek Baptist Association for June 9-13, 2025. I support the adult leaders and chaperones and I give them permission to take reasonable action, as they deem necessary, to protect the best interest of my child. As a parent, I believe my child can handle the responsibilities, with supervision, of participating in the work of this mission trip.

**\*\*10-17year olds must have responsible adult accompany them on this trip.**

I, the undersigned, willingly allow my son/daughter, \_\_\_\_\_, to participate in all activities organized for this trip. In the event that he/she is injured or becomes ill, and requires the attention of a doctor, I consent to any reasonable medical treatment as deemed necessary by a licensed medical provider. In the event treatment is required from a medical provider designated by adult chaperones, I agree to hold such persons, the Coffee Creek Baptist Association and its churches free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I also acknowledge that I will be responsible for the cost of any medical care, should the cost of such care not be reimbursed by my child's health insurance provider. Further, I affirm that the health insurance information provided below is accurate and active for any care my child may require.

**A copy of child's health insurance card should be included with registration**

Insurance Company: \_\_\_\_\_

Primary Care Provider: \_\_\_\_\_ Phone \_\_\_\_\_

Health Concerns \_\_\_\_\_

Medications \_\_\_\_\_

Medication Allergies \_\_\_\_\_

Diet: Can Eat Anything Yes NO (circle one)/Special Diet \_\_\_\_\_

Food Allergies \_\_\_\_\_ Environmental Allergies \_\_\_\_\_

Teen's Phone number, (if has one) \_\_\_\_\_

Please write any additional information on a separate piece of paper and attach this this registration form. Thank you.

By signing below, I also give my permission for the Coffee Creek Baptist Association and its affiliates to use my child's picture on their website, social media sites, and for media releases (web & print). This consent form releases Coffee Creek Baptist Association, its churches and its members of any liability against personal losses.

**\*\*10-17 year olds must have responsible adult accompany them on this trip.**

The purpose of this mission trip is to help those who have been impacted by Hurricane Helene of 2024 in the rebuilding of their homes/communities, as assigned by the construction manager for Western North Carolina and the Coffee Creek Baptist Association leadership team. I have discussed with my child:

the need for him/her to follow the instructions given by a team leader and to demonstrate safe behavior during any/all activities (work and play) and that the teen understands he/she must demonstrate behavior that will be pleasing to Jesus Christ.

THIS FORM SHOULD ONLY BE SIGNED IN FRONT OF A NOTARY PUBLIC.

\_\_\_\_\_  
Parent/Legal Guardian Name      Signature      Date

\_\_\_\_\_  
Notary Signature & Seal

\_\_\_\_\_  
Date

**Mail** to Grace Flynn, Registrar, 139 N. Sharon Dr., Scottsburg, IN, 47170. Call 812-528-8348 with questions. Or **email** [graceflynn83@yahoo.com](mailto:graceflynn83@yahoo.com). **Donations** can be mailed here also. Checks should be made payable to "CCA ABWM."

2025 CCBA WNC Mission Trip Youth consent Form.docx

# 2025 Coffee Creek Association Mission Trip

**MANY DETAILS CANNOT BE FINALIZED UNTIL AFTER THE REGISTRATION DEADLINE** since that is when we will know who is driving, how many people are going, etc. We will have a contact in Western North Carolina who will need these details before they can finalize the housing and job assignments for us. **Once they are known, they will be shared with you.** Most communication happens via email; for those without email, you will be called. **Please check your email daily in the week prior to our departure date.**

## Transportation

Details will be finalized once all registration forms are received. You will need to decide if you want to drive to our destination or carpool.

## Housing

This too will be finalized after the registration deadline so we have a “head count;” on past trips we were housed in a church, free of charge. Some churches provide cots, some do not. You should have a backup plan for “mattress” (Examples: air mattress, foam pad, sleeping bag, etc.) in case they do not have cots for us. Depending upon the size/layout of the church, we may be able to divide among their Sunday school rooms or we may need to split into men in one section and women in another section. The churches we have stayed in on previous trips have had shower facilities in their buildings or nearby.

## Meals

Sometimes we are fed by people of the church/community and sometimes we cook for ourselves. We eat 3 meals per day and have snacks so you will be well fed!

## Miscellaneous

We will watch the weather of course while we travel and work. Weather can change our work assignment too. **We always promote safety!**

Our work assignment hopefully will be made known before we arrive in Western North Carolina. If it is, you will be notified. Once we know, you may be invited to bring some appropriate tools.

There will be opportunities for you to volunteer with portions of our trip. Some examples may include: transportation to Western North Carolina, transportation from base to work sites, food/cooking, photographer, devotions. You will have opportunity to sign up the week before we depart. Expect more details the first week of June! Be sure to check your email!

## Packing

You will need your own bedding (pillow, blankets, sheets), your own personal hygiene items (soap, shampoo, razor, etc.), towels, washcloths, personal clothing to wear while working (the kind that could get really dirty/stained), pajamas, your medications, cell phone & charger for your phone & other personal items. Depending upon our work assignment, you may want long sleeve shirts and long pants and boots. You may need insect repellent and sunscreen. Open toed shoes are not permitted at the worksite! If you can, bring work gloves and safety glasses.

**Thank you for going as the Hands and Feet of Jesus! We go to be a blessing and You too will be blessed beyond measure!**