CONSENT FORM

BLC Mission Trip

Please initial all boxes

Nam	e of Participant Date Signature
	Tetum date on my ticket.
5.	I understand that in order to travel to Bolivia my passport must be valid for at least 6 months from the return date on my ticket.
4.	I understand and agree to abide by the communication guidelines with each of the boys at the BLC. (No written communication without approval from staff member, no private messaging on facebook, consider the example you are setting via posts and photos). Refer to page 15 of this document for a more detailed explanation.
3.	I understand and agree to respect the physical boundaries provided in this handbook. Refer to page 8 of this document for a more detailed explanation.
2.	I understand that it is my responsibility to abide by the dress code provided in this handbook and I understand I will be asked to change if I do not. (No tank tops, low cut shirts, no short shirts, no low-rise pants, no short shorts and no tight fitting clothes). Refer to page 8 of this document for a more detailed explanation.
1.	I confirm that I have read and understand all the information in the provided handbook. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

^{*}I understand that if I email this document that my typed name is my valid signature.

RELEASE OF LIABILITY FORM

The undersigned person in consideration of being granted the privilege of participating in the following on the premises of or under the sponsorship of Children's Impact Network (CIN):

1.	Function/Activity: Mission Trip							
2.	Location:	Bolivia	Colombia	Cuba	Honduras	Chile		
3.	<u> </u>							
4.								
	Does hereby acknowledge that attendance at this function or participation in this activity involves some risk of injury, including the possibility of serious injury and therefore agrees to the following.							
	 I knowingly and freely assume responsibility for risks both known and unknown, including but not limited to: any sickness, accident, death, terrorist acts, kidnapping, theft, acts of God or for any other expense beyond that of normal involvement arising from my attendance and/or participation in the above. I agree to comply with the ordinary and customary terms and rules of my participation and I will voluntarily remove myself should I encounter any reasons for not participating and bring such to the attention of the appropriate ministry authority. If I should require medical attention of any sort during the above identified function or activity, permission is given to CIN or other appropriate supervising adults to act in my behalf in seeking such necessary medical attention. 							
Ethical	Standards							
Children's Impact Network expects the members of our mission teams to conduct themselves with ethical standards, therefore, the following will not be allowed:								
	_		Sexual Miso Thef					
			Illegal Ac					
			Insubordir Alcohol and/or T					
			Alcohol and/of 1	obacco ose				
trip. Obs Jesus Ch be deem departur I give C	scene language, in nrist, or reflection need necessary, the period e. I also testify that IN the right to use ature (as well as n	appropriate dress, of CIN will be con participant will be at I have never bee my voice, photog	insubordination, or any afronted and could resu	y other behavior ilt in dismissal fable transportat of any crime. (ny, and video of	considered detriment from the ministry teation costs back to their If yes, please explain myself for any form	m. Should such dismissal ir US airport of original a) of promotions.		
Particip	oant:							
		(Please Print	Name)	(Sign	ature)	(Date)		
Parent/	Legal Guardian:							
(Under	18 Years Old Only	7)	(Please Print Name)		(Signature)	(Date)		

^{*}After completing this form, please print, sign, date, and give to your team leader, or email it to Natalie@cinonline.org*