



usa

building global friendship

Adult Legal Form- USA, - Medical Care, Release and Consent:

Use: For adults attending CISV USA activities occurring in the United States (mini camps, NBM, NYM, NLT, etc). THIS FORM IS NOT FOR USE FOR INTERNATIONAL PROGRAMS WHETHER HELD IN THE US OR OUTSIDE THE US.

This form is to be completed by the adult participant. The signed original should be given to the camp director/event head. A copy shall be retained by the sending Chapter. Signing this form is a condition of participation in the CISV Activity noted below.

Full Name of Participant _____ Date of Birth _____

CISV Activity and Location _____ (Ex. NBM, Cincinnati)

Telephone: Mobile () _____

Emergency Contact Information: Please provide a contact that CISV Can Use During the Activity In the Event of Medical or Other Emergency:

Name _____

Address _____

Home Telephone () _____ and Mobile Phone () _____

E mail _____

Alternate Emergency Contact (optional) _____

Alternate Emergency Contact Phone Number () _____

Part 1: Authorization for Medical Treatment:

In the event I am unable to give instructions or consent for my own medical treatment, and prompt medical attention is needed, I hereby appoint CISV personnel from the Host Chapter/CISV USA to consent to medical treatment or authorize prescribed medication on my behalf. This Appointment is valid for the period stated below.

From (date) _____ to (date) _____.

Part 4: Medical Insurance & Financial Responsibility for Medical Treatment

I understand that each participant must have medical insurance in order to participate in this CISV Activity. I declare that I do have medical insurance for any medical expenses incurred on my behalf while at the Activity, **and a copy of my medical insurance card is attached hereto. (ATTACH BY STAPLING THE COPY)**

Insurance Company Name _____

Insured _____ Policy Number _____

6: Legal Release & Responsibility to Pay for Damage

I understand the nature of the CISV Activity noted above and I agree not to make a claim or file a lawsuit against CISV if I am injured while traveling to / from and/or participating in the above Activity, unless there has been gross negligence on the part of CISV.

I understand that CISV participants are expected to conduct themselves in accordance with local laws and CISV rules, including the Code of Conduct. I understand and agree that if I violate any CISV Code of Conduct or policies, I may be asked to leave the event before the end of the Activity at CISV's discretion. I will cover the additional costs of any early departure trip or separate location lodging. I also agree to pay for any damage or injury caused by my behavior.

Part 7: Membership

I understand that as part of participation in the above Activity, I must be a Member in a CISV Chapter or of the national association. I agree that CISV will keep a record of my name and contact details, will use this information for internal administration of membership and participation and may contact me in the future with information about the organization. An individual may participate in activities without membership for the purpose of recruitment.

Part 8: Permission to Use Photographs, Art or Written Work

I agree that CISV may use and publish photographs, artwork, and written work as well as video and audiotape created as part of participation in the CISV Activity. CISV may use these items in the production of educational or promotional materials including web pages. Unless my specific consent is obtained, I will not be identified by full name.

Part 10: National Code of Conduct for CISV USA

Please ✓ each box after reading each statement,

- I acknowledge that I have read, am familiar with, understand, and agree to respect and abide by Info File R-7 (0432) standards, guidelines, and recommendations.
- I will abide by all local laws, and standards of acceptable public behavior. Under no circumstances will I purchase or consume alcohol if under the age of 21. In addition, if I am of age, I will not purchase or provide these items for someone else who is under the age of 21. I understand the possession and consumption of illegal drugs will not be tolerated under any circumstances.
- Only people who are assigned to my room/cabin/house will sleep there. In addition, I will respect and follow any additional rules set for the given activity in relation to visitors being in my room.
- I will exhibit respectful and reasonably quiet behavior in all areas of the site including bedrooms, hallways, elevators, public areas, and meeting rooms. In addition, I will show respect towards all hotel/site employees and CISV participants.
- If I need to leave the site for any reason prior to its conclusion, I will notify the event planner or CISV staff of my departure. If I am chaperoning any youth, I will insure that a substitute chaperone is appointed prior to my departure. I also understand that if I am under the age of 25 and need to drive somewhere, I will not drive any youth and will only drive with other adults if they are over 25 years old as per CISV USA's insurance policy. I also declare that if I drive, I have automobile insurance as required by CISV USA's insurance policy.
- I will be on time to, attend, and fully participate in all activities throughout the entire program.
- I will abide by any additional rules.
- I understand that if I violate any of the items on this agreement I will be subject to disciplinary action decided upon by the staff of the activity or CISV USA, including but not limited to having my participation limited in future activities to being sent home at my own expense. I also understand that I will have to pay for any damage to the site that I cause.

Part 12: Signature

Signature: _____

Date: _____

Print Name: _____