

# HENDERSON HILLS BAPTIST CHURCH

## Medical and Release Form

Participant Name (As appears on passport or ID)

Participant Address

Participant Email Address

Home Phone

Work Phone

Cell Phone

Date of Birth

Male or Female

Social Security Number

Beneficiary

Relationship

Emergency Contact Name

Emergency Contact Address

Emergency Contact Home Phone

Work Phone

Cell Phone

List any physical conditions or defects you have (examples: allergies, headaches, etc.):

Medications currently being taken:

Are you allergic to bee stings?      Yes                  No  
What action is necessary in case of a sting?

Do you have any allergies to medicines?      Yes                  No  
If yes, which ones?

In case you need medical attention, are there any special instructions we need to be aware of?

Date of last tetanus shot                          Note: If date cannot be remembered, please secure a booster shot prior to departure.

Medical Insurance Company                          Policy Number

Group Number    Phone Number

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### MEDICAL RELEASE

*As the participant, parent and/or guardian (if under age 18 years of age) of said member I hereby acknowledge that he/she is presently under my care, custody and control. In the event there arises any emergency, needing medical attention, I hereby consent and give my permission to Henderson Hill Baptist Church, or it's representatives, or any attending physicians, to make such decisions and to perform such medical treatment, which may in their sole discretion is necessary and proper under the circumstances. As the participant, parent and/or guardian of said member, I hereby do release, acquit, discharge to hold harmless the Henderson Hills Baptist Church or it's representatives or any attending physician, from any and all actions, damages, or liabilities arising out of the treatment of any sickness or accident incurred by above said participant during time away while on any church activities.*

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

Witness Signature \_\_\_\_\_ Date \_\_\_\_\_

**Covenant**

WHEREAS, the undersigned will be traveling and working on mission projects which are sponsored in whole or in part by Henderson Hills Baptist Church and

WHEREAS, the undersigned desires to release and hold harmless Henderson Hills Baptist Church, its staff members, elders and deacons from any and all claims, demands or actions because of injury or illness to the undersigned.

NOW, THEREFORE, in consideration of the undersigned working or volunteering to work on projects sponsored by Henderson Hills Baptist Church, the undersigned hereby releases and discharges Henderson Hills Baptist Church, its staff members, elders and deacons from claims present and future, known or unknown, in any matter arising out of the undersigned and specifically assumes all risk involved in travel and work on the projects.

The undersigned will never institute any action or suit at law or in equity against Henderson Hills Baptist Church, its staff members, elders or deacons, nor institute, prosecute or in any way aid in the institution or prosecution of any claim, demand, action or cause of action for damages, cost, loss of service, expenses or compensation for or on account of any damage, loss, or injury either to person or property or to both, whether developed or undeveloped, resulting or to result, known or unknown, past or present or future, arising out of the undersigned working with Henderson Hills Baptist Church.

Signature of participant \_\_\_\_\_

Printed Name \_\_\_\_\_

Signature of Parent/Guardian (if under 18) \_\_\_\_\_

Printed Name \_\_\_\_\_

Witness \_\_\_\_\_

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

**Trip Policy**

Preparation and training for overseas missions is vital to the success of our trip, as well as, a service unto the Lord. Christ has given us the authority to take the knowledge of Him, the testimony of the things He has done, and the peace of the word of God to all the nations of the world. We have this great responsibility to bring the light to darkness. Therefore, it is with no apologies we expect you to attend the meetings. We understand there are rare circumstances, which may hinder you from coming, but you will be expected to meet with someone from the mission's staff on your own time. If you fail to attend the meetings or attend the meetings ill prepared, we reserve the right not to allow you to go, and yet, you will still be responsible for the ticket. Your deposit holds your spot, but your faithfulness is an overflow of your heart to serve the Lord.

Do you agree?    Yes                      No

Signature of participant \_\_\_\_\_

Printed Name \_\_\_\_\_

Signature of Parent/Guardian (if under 18) \_\_\_\_\_

Printed Name \_\_\_\_\_

Witness \_\_\_\_\_

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

## Financial Policies and Procedures

### **Trip Costs**

Individuals participating in a short-term mission trip sponsored by Henderson Hills Baptist Church (HHBC) will be responsible to pay for their personal trip cost. Included in the trip cost will be travel, meals, lodging, transportation and travel insurance for the mission trip. Each participant is expected to pay the required trip deposit by the announced deadline. Once a plane ticket is purchased for the trip participant, even if they do not go on the trip, they will be responsible for the full cost of the plane ticket. Although funds will be accounted for individually, all funds paid and raised by trip participants will be treated as team funds. Excess funds will not be refunded to donors but can be transferred to future trips and held for up to one year.

Trip participants will be personally responsible for the following costs, if necessary for the trip: Passport and passport photos, visa, immunizations, country entrance and exit fees, personal items such as clothing, toiletries, prescriptions, etc., and meals in transit .

### **Support Letters**

Participants can speak personally to or send support request letters to family and friends but requests should not be made to groups of HHBC, such as Community Groups. All support letters are to be sent with the express purpose of requesting contributions for expenses directly related to the mission trip only. Contributions donated through HHBC on behalf of an individual will be applied only to the cost of the trip.

All checks should be made payable to Henderson Hills Baptist Church. Checks should not be made payable to the trip participant. The donor should write the trip participant's name and trip destination on the check or enclose a note with this information. Cash donations should be placed in an envelope with the donor's name and address along with the name of the trip participant and the trip destination.

### **Tax Deductible Contributions**

In obedience to the Great Commission, Henderson Hills Baptist Church takes many scheduled short-term mission trips both in the U.S. and internationally. The IRS guidelines regarding the ability to treat contributions for mission trips as tax deductible contributions are complex. HHBC does not provide any tax counsel or guidance to donors, nor does it assume any responsibility other than that required by law. In general the only time a contribution can be considered a tax-deductible contribution for mission trips is:

- When the donor understands that the financial gift is an irrevocable transfer. I.e., the church cannot refund the financial gift.
- The church maintains full administrative control of the mission trip and the expenses related to the trip.
- The mission trip is consistent with HHBC's purposes and there is no significant element of personal pleasure, recreation or vacation in such travel.

### **Other Mission Trips**

HHBC cannot serve as a conduit of funds for individuals to other churches or mission agencies since legally in order for the gifts to be tax deductible, HHBC has the responsibility to exercise full administrative control over the funds.

Do you agree to the terms of the financial policies and procedures?            Yes                            No

Signature of participant \_\_\_\_\_

Printed Name \_\_\_\_\_

Signature of Parent/Guardian (if under 18) \_\_\_\_\_

Printed Name \_\_\_\_\_

Witness \_\_\_\_\_

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