

# **HV BRIDGE BUILDERS MISSIONS - 2018**

## **Adult Application and Information Package**

### **Financial Requirements**

The HV Bridge Builders mission trip is open to student campers, young adults (18-23 years of age) and adult leaders. Individual applications are available for each group. The completed Adult application on page 2, the forms on pages 3-6 and payment are due by **May 1, 2018**.

The Bridge Builder mission trip fee is **\$300 if the application is received by HVBB on or before May 1, 2018. The fee after May 1, 2018 will be \$325.**

Fees include all meals, lodging, project materials, programming, and camp T-shirt.

Please submit your application to your church Youth Pastor/Director and contact him/her with questions. **Checks must be made out to HV Bridge Builders, Inc.** Youth groups should mail checks and applications to HV Bridge Builders, Inc., PO Box 291, Lagrangeville, NY 12540. Please note name of youth group in the memo field of check(s).

If you have no affiliation with a church or have general questions, please email HV Bridge Builders at [camp@hvbridgebuilders.org](mailto:camp@hvbridgebuilders.org).

### **Participation Requirements**

- The camp week runs **Sunday August 5<sup>th</sup> at 6pm** through **Friday August 10<sup>th</sup> at 5pm**. The camp facility is Taconic Retreat and Conference Center, 64 White Drive, Milan, NY. (Directions and description available on website [www.taconicrcc.net](http://www.taconicrcc.net))
- Please eat dinner **BEFORE** coming to camp Sunday evening.
- Youth participation – the minimum age requirement is that youth must be in 6<sup>th</sup> grade or higher during the 2017-2018 school year.
- After **May 1, 2018**, camper additions/changes will be subjected to a case-by-case consideration since there is no guarantee of availability once the camp is full.

# Adult Leader - Application for HV Bridge Builders Mission Trip

## Personal Information

Name: \_\_\_\_\_

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

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Church Affiliation: \_\_\_\_\_

T-Shirt Size: (choose one) Adult S\_\_\_ M\_\_\_ L\_\_\_ XL\_\_\_ 2XL\_\_\_

**Driver must be at least 23 years of age and have a valid license to drive.**

**Please attach a copy of your automobile insurance card on both sides if driving.**

Make/Model of Vehicle: \_\_\_\_\_

# of seats (seatbelts) besides driver \_\_\_\_\_

## Leader:

I bring the following skills (check all that apply)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Cross-cultural experience | <input type="checkbox"/> VBS experience   | <input type="checkbox"/> Construction             |
| <input type="checkbox"/> Painting                  | <input type="checkbox"/> Baseball/sports  | <input type="checkbox"/> Child care/teaching      |
| <input type="checkbox"/> Social Services           | <input type="checkbox"/> Carpentry        | <input type="checkbox"/> Play portable instrument |
| <input type="checkbox"/> Business/management       | <input type="checkbox"/> Leadership       | <input type="checkbox"/> Arts & Crafts            |
| <input type="checkbox"/> Drama                     | <input type="checkbox"/> Games Leadership |   |

Please indicate your choice for Ministry Track. Use a 1 for first choice, 2 for second, 3 for third.  
We will try to honor your request but will schedule drivers according to vehicles and site needs:

- Hammer and Nails** (Yard Work, Painting, Light Construction)
- Social** (Working with the Elderly or People with Disabilities, etc.)
- Games and Rec** (Working with Younger Children, VBS, Games. Etc.)
- Choose for me**

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**PERMISSION TO SEEK MEDICAL ASSISTANCE**

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**TO: HV Bridge Builders Mission Trip participants**  
**RE: Permission for HV Bridge Builders representatives to seek medical attention in case of accident or injury during HV Bridge Builders Mission Trip August 5-10, 2018.**

Date \_\_\_\_\_

I certify that I am the legal parent/guardian of (if 18 or older, sign yourself):

(print adult full name) \_\_\_\_\_

I understand that in the event of injury or accident, medical attention for my child may be required or considered prudent. I give my permission for the HV Bridge Builders adult representatives to seek that medical assistance when they deem it necessary. Please note any medical considerations, allergies and/or dietary needs or concerns we should be aware of:

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The Physician is: \_\_\_\_\_

Physician's phone: \_\_\_\_\_

The Insurance Company is: \_\_\_\_\_

Insurance Policy Number is: \_\_\_\_\_

Date of Last Tetanus shot: \_\_\_\_\_

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(Signature and title: parent, legal guardian, etc.)

\_\_\_\_\_  
(print full name)

Phone numbers where I can be reached: \_\_\_\_\_

Cell phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Other contacts if I cannot be reached:

NAME	RELATIONSHIP	PHONE #
_____	_____	_____
_____	_____	_____

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## PERMISSION WAIVERS

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**1- Parent/Guardian Permission/Liability Waiver: (required if under 18 years old)**

I, as the parent or guardian of \_\_\_\_\_ do hereby give my permission for him/her to participate in the:

**HV Bridge Builders Mission Trip at Taconic Retreat & Conference Center August 5-10, 2018.**

By signing below I release HV Bridge Builders, its paid and volunteer staff, drivers, and sponsors from any liability for injury or damage suffered by the above names minor child and agree to release and hold harmless the same.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

**2- HV Bridge Builders Photo/Recording Release Waiver:**

HV Bridge Builders is delighted that you will be participating in our Bridge Builders Mission Trip August 5-10, 2018. We may be recording this mission trip in a variety of ways including (but not limited to) photos, videos and other recordings, (collectively, the "Recordings"). Your name, voice, image, picture, verbal statements and/or documentary or other materials ("Content") may be included in one or more of those recordings by virtue of your participation in HV Bridge Builders.

By parent/guardian signature below you irrevocably consent to the creation of the recordings and the unrestricted use by HV Bridge Builders of content in any and all recordings in connection with promoting, marketing or celebrating the HV Bridge Builders Mission Trip.

I acknowledge that HV Bridge Builders is not obligated to use the recordings, and I hereby waive any right to review, inspect or approve the recordings, or electronic imagery that may be used.

Additionally, I hereby release HV Bridge Builders and those acting under its authority from any and all claims or liabilities relating in any way to use of the recordings.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

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# Code of Conduct Agreement

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I, \_\_\_\_\_ (print your name), have read the attached expectations (Code of Conduct) for HV Bridge Builders Mission Trip youth participants. I feel that I will be able to abide by those expectations. I make a commitment to participate and be present for the full five days in the prescribed camp and outreach activities. I will do my best to have a Christian attitude as I prepare for the trip and as I attend the camp. I will be willing to sacrifice, grow, be challenged, reach out to others, worship, love others even when it's difficult, and respect codes of behavior, speech and dress.

In order to provide for the safety of campers and staff, HV Bridge Builders retains the right; if deemed necessary and appropriate, to search all personal belongings of any participant who attends camp. If any staff member has reasonable suspicion that a camper possesses any stolen items, substances, articles, or weapons that are prohibited or may endanger any staff/camper, the Camp and/or Program Director have the right to perform a search of the camper and/or the camper's belongings.

In signing this section, I acknowledge that I have read through the above code of conduct. I am aware that I am expected to cooperate in all camp activities. Likewise, I am aware that I am expected to abide by all regulations governing personal conduct and use of camp property. If I do not cooperate, or become a hindrance to the camp program, I understand I will be sent home.

I understand that in the event of disciplinary concerns, my parent or guardian may be notified and I may be asked to leave the camp.

Signed,

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Sign your name

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Parent/guardian's signature (required if under 18 years old)

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Date

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Date

# Assumption of Risks and Agreements of Release and Indemnity



Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex (Please Circle): Male Female

Address \_\_\_\_\_

Name of Insurance Carrier: \_\_\_\_\_

## Assumption of Risks, and Agreements of Release and Indemnity

In consideration of the services of Taconic Retreat Center in offering outdoor program activities, I agree as follows: Assumption of Risks: I acknowledge that I understand the activities in which I will be participating, and their risks. I understand that the risks are inherent in the activities – that is they cannot be eliminated without changing the nature and value of the experience. I voluntarily assume all such risks, inherent and otherwise, and whether or not they are described above.

### Release and Indemnity:

I agree not to sue, and to release and hold harmless, Taconic Retreat Center, its owners, staff members and Board of Directors (Released Parties) with respect to any and all claims which I may now have or acquire in the future, **including claims of negligence (but not of gross negligence or intentionally wrongful conduct)**, arising in any way from my enrollment or participation in Taconic Retreat Center activities.

I further agree to protect and indemnify (that is, defend and pay any judgments, costs, and attorney's fees) Taconic Retreat Center and the other Released Parties from any claim, **including a claim of negligence of a Released Party (but not of gross negligence or intentionally wrongful conduct)** asserted by any third party, including (but not limited to) rescuers, other participants in the activities of Taconic Retreat Center and members of my family, arising from injuries or other losses either suffered by or caused by me in connection with my enrollment or participation in an activity of Taconic Retreat Center.

Other: In the event of illness or injury, consent is hereby given to provide emergency medical care, hospitalization or other treatment, which may become necessary. If a suit is filed against Taconic Retreat Center or any other released party it must be filed in the County of Dutchess State of New York. Any such suit will be governed by the laws of the State of New York, not including those laws which may apply the laws of another jurisdiction.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(If Participant is under 18 years of age)

## **CODE OF CONDUCT – FOR ALL PARTICIPANTS**

### ***KEEP THIS PAGE FOR YOURSELF***

To provide the best experience, all camp participants must agree to the following:

- **NO PRANKING.**
- **To help the camp time be focused on interacting with God and others, I will not bring electronic video devices or computers. I UNDERSTAND THERE IS NO SECURITY FOR VALUABLES.**
- **In order to build relationships with my group, my crew, and others on the mission trip, I will not text message or use my cell phone, iPod, MP3 player, etc. on worksites or during worship programs. I may use my cell phone to call home during free time or to respond to an emergency.**
- **I will NOT engage in intimate contact with any other person.**
- **I will NOT engage in Public Displays of Affection.**
- **I will not possess any stolen items, substances, articles, or weapons that are prohibited or may endanger any staff/camper.**
- **To respect the people of the community and other campers from diverse denominations, I will dress and behave modestly.**
- **I will not act or behave in a way that creates significant distractions or disruptions to other participants or staff.**
- **I will respect the local community and those we live with for the camp week, and will not damage the lodging facility or other property.**
- **I will respect those around me by not using obscene or abusive language or engaging in reckless behavior that could cause harm to others or myself.**
- **To respect other campers and so all can get the necessary rest, I will respect the scheduled lights-out time.**
- **I will not engage in any misconduct which can include inappropriate comments, gestures, or physical contact.**
- **I will respect and follow directives of my adult leaders and other camp adult leaders.**
- **I will act as a positive role model, respect the spiritual growth and work goals of the camp, and participate in all scheduled activities, which are designed to make the most of my camp experience.**

**It is out of respect for God, ourselves, and others that we abide by these rules. If you violate these rules, you may be denied the privilege of participating in the mission camp. You may be asked to leave (without reimbursement) at the request of your church adult leader, adult track leader, or camp director.**