



## Adult Pack Trip Registration Form 2025

Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email Address \_\_\_\_\_

### TO WHOM IT MAY CONCERN:

The undersigned do(es) hereby give permission for:

\_\_\_\_\_ (“Participant”),  
to attend and participate in **First Presbyterian Church of Cody** adult ministry activities, events, and retreats during the period of:  
**June 17<sup>th</sup> – June 20<sup>th</sup> for the Adult Summer 2025 PACK Trip.**

**LIABILITY RELEASE:** In consideration of First Presbyterian Church allowing the Participant to participate in adult ministry activities, we (I), the undersigned, do hereby release, forever discharge and agree to hold harmless First Presbyterian Church, its directors, employees, volunteers and agents (collectively herein the “Church”) from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the youth Participant while involved in the youth activities, other than in incidents considered to be gross negligence. We (I) the parent(s) or legal guardian(s) of this Participant hereby grant our (my) permission for the Participant to participate fully in adult ministry activities, including trips away from the church premises.

Furthermore, we (I) [and on behalf of my Participation hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein, other than incidents considered to be gross negligence.

Further, authorization and permission is hereby given to said Church to furnish any necessary transportation, food and lodging for this Participant. The undersigned further hereby agree to hold harmless and indemnify said Church for any liability sustained by said Church as the result of the negligent, willful or intentional acts of said Participant, including expenses incurred attendant thereto.

**MEDICAL TREATMENT PERMISSION:** We (I) authorize an adult, in whose care has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care, to be rendered to the participant under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned pursuant to this authorization.

**EARLY RETURN HOME POLICY:** Should it be necessary to return home due to medical reasons, disciplinary action or otherwise, the undersigned shall assume all transportation costs and responsibility.

**TRANSPORTATION PERMISSION:** The undersigned does also hereby give permission for participant to ride in any vehicle designated while attending and participating in activities sponsored by First Presbyterian Church. I understand that SEAT BELTS SHALL BE WORN AT ALL TIMES during transportation.

Medical Insurance: YES \_\_\_\_\_ NO \_\_\_\_\_ Insurance Company: \_\_\_\_\_

Policy/Group ID#: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Allergies or Medical Conditions: \_\_\_\_\_

Signature \_\_\_\_\_ / \_\_\_\_\_ Date \_\_\_\_\_