*For the*

*Berlin Mennonite*

*Church Family*

Child Protection and Abuse Response Policy



**Berlin Mennonite Church**

**Table of Contents**

Child Protection and Abuse Response Policy 1

Accident/Incident/Allegation Report Form 3

Motor Vehicle Protection Policy 5

Child and Youth Safety and Behavioral Guidelines

 for Parents, Mentors and Grandparents 7

Consent to Participate, Emergency Contact Info. and

 Consent to Treat Form – Minor 19

Children/Youth Ministry Volunteer Information Form 19

Volunteer’s Acknowledgement of Receipt of the

 Berlin Mennonite Church Child Protection

 and Abuse Response Policy 21

**Berlin Mennonite Church**

**Child Protection and Abuse Response Policy**

Each child is a special gift from God. We acknowledge the high value that Jesus placed on children during his earthly ministry. We seek to make all of our church activities and facilities safe, especially for children. It is our responsibility as adults to do all we can to protect children.

Sadly, child abuse is prevalent; and is hurting children, families and societies everywhere. According to National and Ohio law, abuse can be:

1. *Physical abuse* – any non-accidental injury to the child.
2. *Neglect* - abuse in which a person endangers a child’s health, safety or welfare through negligence such as withholding food, clothing, medical care, education and even affection and affirmation of the child’s self-worth. This is perhaps the most common form of abuse.
3. *Emotional and mental abuse* – exposure of a child to spoken and/or unspoken violence or emotional cruelty which sends a message to the child of being worthless, bad, unloved, and undeserving of love and care.
4. *Sexual abuse* - any sexually oriented act, practice, contact, or interaction in which the child has been used  for sexual stimulation of another individual.

Child abuse prevention within our church community

We must be prepared in both knowledge and practice to prevent all types of child abuse and neglect. This policy applies to all church ministries including but not limited to Sunday school, youth activities, Vacation Bible School, Family Nights, and nursery. **We commit to:**

1. Attend to personnel issues in the Application Process:
2. All volunteers must have regular involvement in the church for at least one year before being considered to serve as a volunteer working with children. Exceptions include, but are not limited to, volunteers who have had background checks conducted by their sponsoring organization, for example, the International Volunteer Exchange Program (MCC). Also, volunteers will need approval from the Spiritual Leadership Team (SLT) before serving as a mentor.
3. All volunteers must submit a signed Information Form (which will be kept confidential) before leading or participating in children/youth activities.
4. Annually, each teacher and leader of children will be presented with a copy of the congregation’s Child & Youth Protection Policy and required to acknowledge that they have read and will abide by the policy.
5. A national criminal background check will be conducted on all church staff, including the pastors and church interns, before hiring. A general search will be conducted on all volunteers as well using the National Sex Offender Registry and other available online searches. The church reserves the right to conduct a background check for any volunteer working with children in the congregation. These background checks will be conducted in all the states the individual has lived in the previous 10 years.
6. Offer trainings:
	1. Annually, training and materials will be offered to all adults in the congregation, and especially to teachers and leaders of children. Training may be specific to child abuse, or may be on a related topic such as child safety, child development, healthy family relationships, or any protective or risk factor for abuse.
	2. Every 2 years, resourcing will be offered to all children (ages 6-18) and their parents related to child abuse and/or child safety (possible topic for elementary age children: safe touch; possible topic for adolescence: dating violence). This training will be appropriate to the child’s age group. Parents will be invited to participate in training with their child(ren).
7. Make our church facility safe for children:
	1. Windows are in all doors where children or youth ministry is conducted (i.e. Sunday school rooms,  pastor’s office).
	2. A First Aid kit is available in the kitchen of the fellowship hall.
	3. In the event of an emergency, evacuation routes are posted next to the doors of each Sunday school classroom.
8. Provide safe and adequate supervision to children:
	1. Superintendents are church members, approved through the gifts discernment process, and should complete trainings as they are offered. All workers will complete a Children/Youth Ministry Information Form.
	2. Follow a “Triangle rule,” which means a child or youth will not be alone with an adult on or off-site. This applies especially at overnight activities involving children and when activities are being conducted in homes or other private locations.
	3. A youth (18 years or younger) should never teach/care for children alone without a supervising adult available.
	4. When possible, a parent must be notified ahead of time and give consent for their child to be transported away from church facilities. Special events that require transportation of participating children will require permission granted as part of the event registration form.
	5. No physical discipline (hitting, slapping) may be used. When a child misbehaves, an adult may use redirection and/or verbal means to guide the child’s behavior. If this does not work, the child shall be taken to his/her parent for further action.
	6. Efforts are made to keep adult to child ratios to 1:4 for infants and toddlers, 1:10 for two-year-olds through kindergartners, and 1:15 for elementary-aged children. Occasionally this ratio may be increased due to last-minute cancellations by volunteers or to unexpectedly large numbers of children participating in a program or event.
	7. Every child who regularly attends a BMC children’s ministry program or special event must have a completed Consent to Participate form which includes an Emergency Medical Authorization and Waiver of Liability prior to the child attending the program or event. New guests attending weekly programs may be temporarily exempted from this requirement. Medical Authorization forms will be updated annually. Forms that are outdated will be shredded.

5. Deal appropriately with accidents, allegations, incident response and reporting:

1. When a child discloses abuse or child abuse is suspected, the Pastor and/or a member of the Spiritual Leadership Team and the Holmes County Department of Jobs and Family Services (330-674-1111) or the police (911) will be notified at once. If there is uncertainty as to whether a situation requires reporting, it will be referred to the pastor or other church leader knowledgeable in the area of child abuse. The alleged offender will be removed immediately from all responsibilities involving contact with children until the conclusion of the investigation. All parents whose children may have come into contact with the alleged offender will be notified within 48 hours that allegations have been made and reported to the authorities.
2. When child abuse allegations have been made, pastoral care will be offered to all involved, by the pastor and/or appropriate referrals will be made by the pastoral staff.
3. Any individual who is known to have been convicted of a child sexual offense will not be allowed any unsupervised contact with children, and will be prevented from being involved in children’s or youth ministry (formal or informal). Any appeals concerning this item will be considered by staff and the Spiritual Leadership Team.
4. All parents of children and youth in the church must be notified if there is a registered sex offender attending church at the time this information becomes known. New families to the church must be notified of this information within 2 months of their beginning to attend church.

This policy is administered by the Family Life Pastor in conjunction with the church staff and Education Committee. Questions and concerns can be addressed to jeff@berlinmennonite.org, or by phone at (330)893-2320.

Adopted July 2015

**Berlin Mennonite Church**

**Accident\*/Incident/Allegation Report Form**

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of preparer: (printed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please circle which is being reported: Accident \* Known incident Allegation Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of accident/incident/allegation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of accident/incident/allegation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date and time incident was first reported: \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_:\_\_\_\_\_AM PM

Who made you aware of the accident/incident/allegation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name(s) of children/youth involved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe the accident/incident/allegation as you saw it or as it was reported:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did anyone else witness the accident/incident/allegation (list names)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe any visible physical injuries observed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If injuries were treated, describe treatment and by whom?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was anything said by the victim, witnesses, or accused (describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Were parent(s)/guardian(s) notified? \_\_\_\_\_\_ If yes, when? \_\_\_\_\_\_\_\_\_ By whom? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was the accident/incident/allegation reported to authorities? \_\_\_\_ yes \_\_\_\_ no

If so, who was contacted (list details): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was the insurance company notified? \_\_\_\_ yes \_\_\_\_ no

What other aspects of the accident/incident/allegation need to be shared? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*A reportable accident is one which requires medical attention.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_

Adopted July 2015

**Berlin Mennonite Church**

**Motor Vehicle protection policy**

Any approved driver wishing to transport youth must:

* Have a copy of their driver’s license kept on file at the church
* Have a copy of their auto insurance kept on file with the church

All passengers are required to wear seatbelts at all time.

Minors may drive to and from an event only if permitted by their parent/guardian. Minor drivers may only transport another minor with written permission/ hold harmless agreement from all parents involved. Minor drivers must adhere to the teen driving laws of the State of Ohio.

An accident report must be completed by the driver in the event of any accident. All accidents will be reported immediately to the ministry staff. The church insurance provider will be notified immediately.

.

Adopted July 2015

**Berlin Mennonite Church**

**Child and Youth Safety and Behavioral Guidelines for Parents, Mentors and Grandparents**



Fall 2015

Dear Parents, Mentors and Grandparents,

Our church family is blessed with many active children and youth. I take seriously the need to create a safe space where they can learn about Jesus’s amazing love and experience community and friendship. It is my desire to partner with you in keeping your children safe, and creating this holy space for growth.

In this packet, you will find information relating to behavior expectations, safe behaviors and practices, caring for our facilities, resources for further study and a response form. Please read through the information and use the response form to provide feedback to me regarding our environment for children and youth.

As always, I am available for questions and concerns. The best way to contact me is by emailing jeff@berlinmennonite.com.

Blessings to your family!

Jeff Hochstetler

Family life pastor

We ask that all children attending BMC activities abide by these 5 expectations:

1. **Listen to the leader and follow directions.**
2. **Ask permission before leaving the area.**
3. **Participate in activities without complaining.**
4. **Take good care of our surroundings and equipment.**
5. **No running, hitting, fighting or name calling.**

*Respect* is the core concept of each of these expectations. Below are some simple illustrations of what it looks like to respect our leaders, our environment and our peers.

|  |
| --- |
| *Respect for our surroundings:** If it doesn’t belong to you, don’t touch it.
* Clean up after your activity.
* Make sure you have all of your belongings before you leave.
* If you see a mess, clean it up or tell a leader about it.
* Use equipment the way it is meant to be used.
* Use only the areas of the buildings that are needed for your activity.
* Throw away trash and dump liquids in a sink instead of a trash can.
* Use items for the purposes for which they were intended, and use only what you need.
* Leave the trail behind you nicer than it was when you arrived!
 |
| *Respect for each other:** Be aware of the people around you to avoid collisions.
* Move at the same speed as the people around you.
* If a much smaller or much older person crosses your path, let them go first. This is called courtesy.
* Make only the amount of noise necessary for the activity you are supposed to be doing.
* Leave the building in good shape for the next people to use it. (See respect for surroundings.)
* Hold doors open for people, especially if they are carrying things.
* Look people in the eyes and say hello.
 |
| *Respect for leaders:** Listen carefully to directions and warnings.
* Be where you are supposed to be.
* Follow instructions and safety reminders.
* Say “thank you” and let them know when you have been blessed by their actions or words.
* If you disagree, speak calmly and at a normal volume and speed.
* Try to arrive and depart on time, and let your leader know when you can’t attend if possible.
* Participate in activities with a willing attitude.
 |

***Recommended practices for keeping children safe in a church environment:***

**Preschoolers:**

* Should be accompanied everywhere they go until they arrive safely at their destination
* Should always be within sight of a responsible adult
* Should always be accompanied to the bathroom or drinking fountain by a family member or activity leader
* Should never roam unaccompanied or in the care of a child under the age of 12
* Should remain in areas designated for their use

**Kindergartners through Third graders:**

* Should be accompanied everywhere they go by an adult or older child
* Should always be within sight of a responsible adult
* Should always be accompanied to the bathroom or drinking fountain by a family member, another child of similar age or activity leader
* Should never roam unaccompanied
* Should be picked up promptly at the conclusion of an activity
* Should remain in areas designated for their use and not arrive more than 5 minutes early for activities

**Fourth Graders through Junior High:**

* Should travel with a peer to use the restroom or get a drink
* Should never roam unaccompanied
* Should remain in areas designated for their use and not arrive more than 5 minutes early for activities

**High Schoolers:**

* Should remain in areas designated for their use and avoid entering areas designated for younger children unless they have been asked to volunteer

**Resources**

Berlin Mennonite Church’s Child Protection and Abuse Response Policy, along with all relevant forms, are available from our Family Life Pastor, Jeff Hochstetler. These forms include:

* Child Protection and Abuse Response Form
* Motor Vehicle Protection Policy
* Accident/Allegation/Incident Report Form
* Consent to Participate, Emergency Contact Info. and Consent to Treat Form – Minor
* Children/Youth Ministry Volunteer Information Form
* Child Protection Policy and Guidelines: A Crash Course for Volunteers

*Circle of Grace* is a child-protection and awareness curriculum created by the Catholic Archdiocese of Omaha, Nebraska in response to the prevalence of child abuse complaints within the church. It was adapted for use in a Mennonite context by the Dove’s Nest Collaborative (dovesnest.net) and then adapted for use in the home by our church staff. Copies of the home-based curriculum are available by contacting jeff@berlinmennonite.com.

**Berlin Mennonite Church**

**Child and Youth Protection Safety Guidelines for Parents**

 **Response Form**

Where do you see our congregation doing well at keeping our children and youth safe?

Where do we need to invest additional effort into creating a safe space for children and youth?

What is the biggest challenge in keeping our children and youth safe?

What facility concerns need to be addressed to continue moving toward a safe environment for all?

What questions do you have regarding the safety of children at Berlin Mennonite?

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

Detach and return this completed form to the church office.

**Berlin Mennonite Church**

**Consent to Participate, Emergency Contact Info. and**

**Consent to Treat Form - Minor**

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

Name of Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male/Female (circle one)

Name of Parent(s) or Guardian(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Date of Birth: \_\_/\_\_/\_\_\_\_ Grade (or grade entering if it is summer):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Circle all programs in which your child has permission to participate:

All Sunday School VBS JYF MYF Choir Family Nights Children’s Church Other\_\_\_\_\_\_\_\_

List any activities the child is not permitted to engage in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Best Email to send schedules, etc.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact Information**

 Name and relationship to child Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have food allergies? \_\_\_\_yes\_\_\_\_no Explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have any special concerns of which leaders should be aware? \_\_\_\_yes \_\_\_\_no

Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Transportation and Release Instruction**

Name of person who usually transports child to activities, relationship, if not parents and typical location during Sunday School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check all that Apply:

\_\_\_\_My child may leave on his/her own after activities. (for children in 3rd grade or older)

\_\_\_\_My child needs to wait to be picked up.

 Person(s) authorized to pick up child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_My child may ride with staff and volunteers to regularly scheduled activities.

\_\_\_\_My child is a licensed driver and I give my permission for them to drive other youth for local MYF events.

\_\_\_\_I give my permission for my child to ride with a licensed youth, appointed by the MYF sponsors for local MYF events.

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_ Male/Female

Doctor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dentist:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facts concerning the child’s medical history, INCLUDING ALLERGIES, medications being taken, and any physical impairment to which a physician should be alerted – please attach an extra sheet.

**Consent to Treatment.** I authorize and consent to any diagnostic examinations, administration of anesthetics and/or drugs, medical and/or surgical treatment, and hospital care required to be rendered to our child under the general or special supervision and on the advice of physicians, surgeons, anesthesiologists, dentists, or ophthalmologists licensed in the location where treatment is rendered, or by other qualified medical personnel acting under their supervision. We further consent to the release of any medical records and medical information for our child between any medical providers under this Consent and our child’s customary medical providers and any Berlin Mennonite Church staff or volunteer accompanying our child in seeking treatment while such child is under the authority of Berlin Mennonite Church, its staff and volunteers (collectively “Church”). Minor treatment not normally requiring a physician and life-saving emergency treatment may be rendered to our child by any person. **Notification.** With the exceptions of minor treatment not normally requiring a physician and life saving emergency treatment, reasonable attempts to reach me or another parent or guardian at the numbers listed above shall be made by such treating person or facility prior to such treatment if notification will not jeopardize our child’s good health, or immediately after such treatment if the delay for notification may jeopardize his/her good health. Major surgery should not be conducted without the consent of one of the undersigned unless at least one other qualified (physician, dentist, ophthalmologist, or other licensed professional according to the situation) medical opinion concurs with the need for such immediate major surgery without the consent of one of the undersigned.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of parent or legal guardian Date

Photo Release (Initial One Choice)

\_\_\_\_ I give permission for the pictures of my child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to be released to the public.

\_\_\_\_ I do NOT give permission for the pictures of my child to be released to the public.

**Expiration.** This Consent EXPIRES one year from the date of the signature below (unless extended via review and initialing).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Guardian Date

Date\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_

Adopted July 2015

**Berlin Mennonite Church**

**Children/Youth Ministry Volunteer Information Form**

**(Confidential)**

This application must be completed by all volunteers who will have supervision or custody of minors. It is used to help the church provide a safe and secure environment for those children who participate in our programs.

 Today’s date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Name (First, Middle, Last): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any other names you have had:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home/cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How long have you lived in this state? \_\_\_\_\_\_\_\_\_\_

Sex: \_\_M \_\_F Date of Birth:\_\_\_/\_\_\_/\_\_\_\_\_

Driver’s License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a member of Berlin Mennonite Church (BMC)?

 \_\_\_Yes

 \_\_\_I am interested in becoming a member

 If not, where are you a member? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* If you have regularly attended for less than 3 years, please list (on the back) 3 individuals who have known you for at least 2 years that we could contact for references.

Employer Name and Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list residences and churches attended in the past 10 years:

Address City State Church Attended

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List any training or past experience you have that would prepare you for children’s ministries at BMC and indicate approximate dates, organization name, and type of work or training on a separate sheet. Do you have first aid or CPR training? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The questions listed below are included in order to help provide a safe and secure environment for our children. All information is kept in a confidential file. Thank you for understanding.*

Is there any reason you should not work with or around minors? \_\_\_\_\_ yes \_\_\_\_\_no

Have you ever been convicted of a felony? \_\_\_\_\_yes \_\_\_\_\_no

Have you ever been convicted of a crime involving minors? \_\_\_\_\_yes \_\_\_\_\_no

If yes to any, please explain here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant Verification and Release**

As part of the church’s procedure for verifying the information provided by me on this form or evaluating me for employment purposes, I understand the church may contact persons, employers and/or organizations named by me in this form, conduct a national criminal background check, conduct a sex offender registry check, and a social security trace or other appropriate background investigative report which may include information gathered through person interviews with third parties, family members, and persons, with whom I am acquainted. I consent to the church making such checks and understand that this may include information regarding my character, general reputation, and personal characteristics. I further agree to sign any and all documents, consents and/or agreements which may be necessary for the church and its authorized representatives and/or designees to complete the above.

By signing this form, I authorize the church to request and obtain the information described above. Further, I release the church and its denominational agency, affiliates, related entities, agents, employees, and officers (collectively “church”) and all references from any claim or liability whatsoever arising out of such request or any information disclosed in response thereto, and I agree to hold the church and all references harmless and will not to bring any action or assert any claim against the church or any reference on account thereof.

I have read and understand the above and affirm that the information I have provided on this application is true and correct.

I have carefully read the policy and procedures of the organization, and I agree to abide by them and to protect the health and safety of the children or youth at all times.

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

**References only if you’ve attended BMC for less than three years:**

(Please list three with at least one being an organizational or professional reference)

1. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Update and renewal.** Please attach any new information on a separate sheet of paper or sign if no changes.

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

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

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

Adopted July 2015

**Berlin Mennonite Church**

**Volunteer’s Acknowledgement of Receipt of the**

**Child Protection and Abuse Response Policy**

I have been given a copy of the Berlin Mennonite Church **Child Protection and Abuse Response Policy** and have read and understand this document. I commit myself to respect and treat well the children/youth at Berlin Mennonite Church by adhering to this policy.

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