

First Parish Ferry Beach Safety Code

All youth attending the Ferry Beach Family Retreat of First Parish in Concord and First Parish in Lexington (with their own families or sponsored by an attending adult/family) are expected to be familiar with and uphold the following rules of conduct, which are designed to promote a safe and healthy retreat community. These rules of conduct are in place for the protection of our youth and the safety of all retreat participants.

1. The following conduct is expected of youth participants at the First Parish Ferry Beach Family Retreat, whether staying in a room or camping on the campus, or staying off-site:
 - a. demonstrating mutual respect and personal well being;
 - b. providing emergency information at the request of adult leaders;
 - c. complying with curfew and sleeping arrangements as announced by the adult leadership;
 - d. complying with this safety code;
 - e. complying with the rules of the Ferry Beach Association (included in registration materials and posted in lodge) and additional rules as posted or announced by adult leadership;
 - f. signing up for and carrying out clean up or other duties, as stipulated for all retreat participants over age 12;
 - g. keeping parents or sponsors aware of where you will be at all times.

2. The following conduct is not allowed by youth participants at the First Parish Ferry Beach Retreat:
 - a. possessing, consuming or distributing alcoholic beverages, drugs, or tobacco products;
 - b. possessing any weapons or firearms, or using fireworks;
 - c. committing any inappropriate behaviors as determined by the adult leadership or committing any illegal acts, including vandalism or disturbing the peace;
 - d. sexual behavior;
 - e. exclusionary behavior;
 - f. gambling;
 - g. sleeping in the Ziegler Room (lounging room in Rowland);
 - h. being on the beach at anytime without an adult present;
 - i. being on the beach at all after 11:00 p.m., if under age 18;
 - j. **being in the water at all when no lifeguard is present.**

3. Damages incurred by youth participants at the Retreat will be the responsibility of those youth involved in the damages and their parents and sponsoring family.

4. Violations of this safety code will result in sanctions as determined by the adult leadership and may include expulsion from the Retreat. In the case of underage alcohol or drug use, it **will** result in immediate expulsion. In cases of expulsion of sponsored youth, parents/guardians will be required to pick up their child(ren) at Ferry Beach or make arrangements with the sponsor(s) for their departure.

Youth Permission Form - For All Under 21 Attending Without Parent/Guardian

Please note: There is no Youth Retreat within the Ferry Beach Family Retreat. However, youth are welcome to participate without their parents so long as they are sponsored by an attending adult, agree to the terms below, and submit a completed Permission Form, Medical Information Form, and Teen Waiver Form (if aged 13-17) along with their Registration Form. No adult/family should sponsor more than two youth. This form applies to youth in 6th grade through age 20.

Sponsoring Family:

I/We, _____, have agreed to sponsor _____ for the Ferry Beach Family Retreat of First Parish in Concord, MA, which includes: providing transportation to the retreat from home and from the retreat to home; lodging, meals and medical services as necessary. I/We understand that **no sponsored youth under age 18 under our supervision may drive**, in part or in totality, to the Retreat from home or from the Retreat to home. I/We also understand that I/we are responsible for supervising the conduct, activities and sleeping arrangements for youth under my/our sponsorship and that youth must be sleeping in reasonable proximity to my/our sleeping quarters for us to supervise - e.g. tent must be near the sponsor's tent or their room must be near the sponsor's room.

Parent/Guardian of Sponsored Youth:

I, _____, give permission for my child, _____, to attend and participate in the Ferry Beach Family Retreat of First Parish in Concord, MA, and I understand that there is no Youth retreat within the Ferry Beach Family Retreat. I give permission for my child to be sponsored by the _____ family for this weekend long event. I/We have made the sponsoring family aware of any and all health issues and medications (prescription and over-the-counter), including any conditions that would be critical in an emergency, as well as severe allergies requiring an epi-pen, diabetes, and medications for disorders or depression that my child will be taking during the Retreat. The _____ family has my permission to seek emergency medical treatment for my child if deemed necessary. I understand that my child is expected to uphold the *First Parish Ferry Beach Safety Code*.

Youth Being Sponsored:

I, _____, understand that the _____ family is sponsoring me at the Ferry Beach Family Retreat of First Parish in Concord and that I am expected to abide by their rules, those of the Ferry Beach Association and the *First Parish Ferry Beach Safety Code* (elsewhere in registration packet).

Youth, Parent(s)/Guardian(s), and Sponsor(s) Agreement:

I/We have read and agree to uphold this Permission Form and the *First Parish Ferry Beach Safety Code*.

Youth Signature(s): _____ Date: _____

Parent/Guardian Signature(s): _____ Date: _____

Sponsor Signature(s): _____ Date: _____

Medical Information: Required for All Under Age 21

For Youth attending with a Sponsor, must be turned in with Registration or Permission Form.

For children/youth attending with Parent(s), must be turned in with Registration OR at Check-in upon arrival at Ferry Beach.

1. Name(s) of child(ren)/youth _____

2. Birth date(s) of child(ren)/youth _____

3. Contacts:

Name(s) of parent(s)/guardian(s) and contact info during weekend

Name _____ Cell Phone _____

Name _____ Cell Phone _____

Other Emergency Contact(s) if parent/guardian not immediately available:

Name _____ Phone(s) _____

Relationship to child/youth _____ Address _____

If attending Ferry Beach with a sponsor, give name of sponsor: _____

4. **Medical:** Please list any medications that each child/youth is taking: _____

Date of most recent tetanus booster: _____

Drug allergies: _____

Food allergies and/or special dietary considerations _____

Medical Insurance and Information:

Company: _____

Policy number: _____

Subscriber Name: _____

Child/Youth's primary doctor _____ phone _____

5. Emergency Treatment Authorization

This health history is correct as far as I know. In the event that I am unable to be reached in an emergency, I hereby authorize the physician selected by the adult leaders or volunteers of the Ferry Beach Weekend, to hospitalize, secure proper treatment for, and order injections, anesthesia or surgery for my child/youth named above.

Signature of parent/guardian: _____ Date: _____

If there is any other information that might be needed please add below:

Families with Teens aged 13-17:
**The Concord and Lexington Planning Committee asks that
you complete this form from Ferry Beach
and submit with your registration.**

**Ferry Beach Park Association
TEEN WAIVER AND RELEASE FORM**

Ferry Beach Park Association is committed to conducting its programs, services, and activities in a safe manner and in accordance with our insurance carrier. FBPA policy dictates that children under the age of 18 must be supervised by an adult at all times. No children are allowed on the beach at any time without an adult supervisor. Parents and/or guardians must recognize that there is a greater likelihood of risk-laden behavior when teens are not supervised by adults.

Parents/guardians are solely responsible for allowing their teens to participate in group unsupervised time.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that as a parent/guardian of a teen who participates in unsupervised time, while visiting Ferry Beach Park Association, you will be expressly assuming the risk and legal liability, and waiving and releasing all claims for injuries, damages, or loss which you or your teen might sustain as a result of participation, or damages to Ferry Beach.

I recognize and acknowledge that there are certain risks to unsupervised teens and that by allowing my teen to participate in such an event, I voluntarily agree to assume the risk of all injuries, death, damages, or loss, regardless of severity, that they, or I, may sustain as a result of said activities. I further agree to waive and relinquish all claims I may have as a result of such activities against Ferry Beach Park Association or any of the respective official, officers, employees, agents, and/or other volunteers, collectively or individually.

I have read and fully understand the above important information, warning of risk, and waiver and release of all claims.

Teen's Name(s) (please print): _____

Teen's Signature(s): _____

Teen's Age(s): _____

Parent/Guardian Signature: _____