

**LA CRESCENTA PRESBYTERIAN CHURCH**  
**REGISTRATION FORM FOR DOMINICAN REPUBLIC MISSION TRIP**  
**June 15-24, 2019**

2902 Montrose Avenue, La Crescenta, CA 91214  
(818) 249-6137      www.lcpc.net

The fee for this trip is \$1,490 or \$690 for those who will fly to the DR apart from our group. Every participant must fill out this registration form. We need this information so we can keep you safe, organize the team, and buy your airline ticket.

To reserve your place on the team, you must complete this form and return it to La Crescenta Presbyterian Church with a deposit of \$400. The registration deadline is Monday, January 28, 2019.

Make your check payable to: "La Crescenta Presbyterian Church" and write "Project Dominicana, June 2019" in the note section. Consult the mission calendar for the packing list and information about immunizations, as well as mandatory meeting dates for all team members and fundraisers for high school age students (www.lcpc.net).

**SECTION I: CONTACT AND MEDICAL INFORMATION** (for all participants)  
*Print your name legibly exactly as it appears on your passport:*

Sex: M F

Last Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home address: \_\_\_\_\_ email: \_\_\_\_\_

\_\_\_\_Adult    \_\_\_\_Student    \_\_\_\_Grade (if student)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**FOR PARTICIPANTS UNDER AGE 19:**

Name – Father/ Guardian: \_\_\_\_\_ Main Phone: \_\_\_\_\_ email: \_\_\_\_\_

Name – Mother/ Guardian: \_\_\_\_\_ Main Phone: \_\_\_\_\_ email: \_\_\_\_\_

**FOR EVERYONE:**

**PASSPORT NUMBER, EXPIRATION DATE:** # \_\_\_\_\_ Expires: \_\_\_\_\_

Immunization: Are all immunizations and shots up to date?    \_\_ Yes    \_\_ No

List any allergies you have: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

List any medications you take: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

List any medication allergies you have: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Eating Habits: Are you a...    \_\_ Red meat Vegetarian?    \_\_ All meat vegetarian?

Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_ Group # \_\_\_\_\_

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

Physician (if any): \_\_\_\_\_ / \_\_\_\_\_  
Name Phone #

**SECTION II: MEDICAL RELEASE (left side if parent of youth; right side if age 18 or older):**

**For the Parent, or Legal Guardian of Youth under 18:**

“I, the Parent, Agency Representative or Legal Guardian, hereby give consent to La Crescenta Presbyterian Church (Staff, Leaders, Advisors, Representatives) to provide all emergency dental or medical care prescribed by a duly licensed physician (M.D.) or dentist (D.D.S.) at a hospital, clinic or medical office to my child.

“This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my child.”

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

**For Adult Participants Age 18 or Older (Including LCPC Staff, Leaders, Advisors, Rep.):**

“I, the undersigned, give my permission to any licensed physician (M.D.) or dentist (D.D.S.) at a hospital, clinic or medical office to provide for me all emergency dental or medical care that has been selected by one of the event/trip Staff, Leaders, Advisors, and/or Representatives.”

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

**Section III: FOR PARENTS/ GUARDIANS OF STUDENTS UNDER AGE 19:**

“My child/ guardian, \_\_\_\_\_, [WRITE NAME] has my permission to participate in the Dominican Republic mission trip planned by La Crescenta Presbyterian Church for June 15-24, 2019. I understand that this may involve working on a construction site with tools such as picks, shovels, power tools and concrete mixers; beach trips; and field trips in buses, vans or cars. I understand that the pick-up/drop-off of my child by another parent or representative after the event will not be permitted without prearranged permission from the child’s parent/guardian with the LCPC trip leaders. I have read the Covenant below and I agree to pay any expenses incurred during travel if my son or daughter violates the Covenant and is therefore sent home early. I also understand that the registration fee of \$400 is due on January 28, 2019, that the fee is non-refundable after that date, and that the balance of the trip fee is due on May 20, 2019.”

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

**SECTION IV: COVENANT FOR ALL PARTICIPANTS (students and adults):**

**All participants of Project Dominicana 2019 are expected to enter into the following covenant:**

“I pledge to follow and uphold the following rules. I will...

- ...show respect for others and try to spread good cheer to all.
- ...respect the authority of the staff, leaders, and advisors.
- ...respect others’ privacy, stay clear of areas designated off limits to the opposite sex, and work to keep our living space clean.
- ...be on time for and participate fully in all designated group activities, including orientation prior to trips, meals, talks, small group meetings, travel, work, recreation and worship.
- ...inform the staff, leaders, and/or advisors before I make short trips with friends, and abide by the established curfew.
- ...exhibit modesty in my relations with the opposite sex.

I will NOT: travel or swim alone or otherwise endanger myself, drink alcoholic beverages, take drugs (prescription drugs excepted), or use tobacco products.

**“I understand that the registration fee of \$400 is non-refundable after 1-28-19, and that the fee balance is due on 5-20-19.”**

Team member’s signature (youth or adult) \_\_\_\_\_ Date \_\_\_\_\_

**SECTION V: FOR STUDENTS UNDER AGE 19 (skip if you are age 19 or older):**

“I understand that if I fail to uphold this Covenant I may be sent home early at the expense of my family, and that I may be prohibited from participating in future trips with LCPC.”

Team member’s signature (youth) \_\_\_\_\_ Date \_\_\_\_\_

**SECTION VI: EMERGENCY CONTACTS**

A. Contact in case of emergency:

Name (someone other than parent): \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_

B. FOR PARENTS ONLY: Is there anyone NOT authorized to pick up your child? \_\_\_\_\_

**SECTION VII: DONATIONS TOWARDS THE “SUPPLIES BUDGET”** Our team will be spending at least \$15,000 for construction supplies and other items we will need to complete our projects. You are invited to make a special donation to help with these expenses. *Participants are not obligated to give; we appreciate any donation you can offer.*

“I have included with my registration form and fee a separate check (to LCPC, noted ‘Donation – DR 2019 supplies’) in the amount of:

\_\_\_ \$25 \_\_\_ \$50 \_\_\_ \$100 \_\_\_ \$150 \_\_\_ \$200 \_\_\_ \$300 \_\_\_ \$500 \$ \_\_\_\_\_ Other

*[PROJECT DOMINICANA REGISTRATION - CONTINUED]*

**SECTION VIII: BRIEF REFLECTION QUESTIONS REQUIRED FOR ALL APPLICANTS**

Participating in a mission trip requires physical, spiritual and emotional focus. Every team member is affected by the attitude and demeanor of every other member. It is a very fun week, but also a week that is challenging on many levels.

Please take time to reflect on your understanding of the Dominican Republic mission trip and your role in it.

- 1. What do you understand to be the purpose of Project Dominicana? What are the main goals?**

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- 2. How do you hope to contribute to the mission and to the unity of the team?**

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- 3. Please indicate that you have carefully read the participant covenant (section IV) and understand that alcohol consumption is not permitted by participants of any age, at any point of this trip. Also please explain briefly why you think it is important for all participants to uphold the covenant during the trip.**

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