

Agreement Policy for Mexico

**Please read and consider carefully before signing.
You may decide not to participate after reading this.**

Initial I agree that I will not bring or use any Drugs, Alcohol, Cigarettes, and Chewing Tobacco while participating with the event of Back2Back Ministries.

Initial I understand that if there is any reason to believe a student has drugs or alcohol, bags can be checked.

Initial I understand that there will be no women in men's rooms and no men in women's rooms.

Initial I understand that there is no leaving the rooms after curfew and I agree that I will not leave my room after curfew. I will not leave the grounds under any circumstances.

Initial I give permission for Back2Back to use group or individual photos or video in any B2B publication.

Initial I agree to be on time to all departures and events throughout the trip.

Initial I agree to respect the authority of the leaders.

Initial I understand that any damage on my behalf will be my financial responsibility and agree to pay for any damages.

Initial I agree not to use my **cell phone** or **portable music device** during my time serving the children and communities with Back2Back Ministries. I understand that I need to abide by my Trip Coordinator's rules regarding the use of cell phones and portable music devices at other times during the mission trip.

Initial I agree that I will not harm any child by teaching inappropriate language, coarse jesting, or by sexually or physically abusing them in any way. I understand that if I were to break any law regarding the endangering of the children served through Back2Back, the ministry will cooperate with authorities to the full extent of the law.

Initial I understand that participation in mission programs offered with Back2Back is based upon a "participation by choice" philosophy. I agree to let one of the B2B staff members know if I feel that project or activity in which I am involved is beyond my physical capabilities.

Please fill out this portion completely. Please PRINT.

Name of participant: _____

Address: _____

City, State, Zip: _____

Birthdate: _____

Phone number: _____

Email: _____

Participant signature: _____

Parent's signature: _____ **(if participant is under age 18)**

Emergency Contact & telephone: _____