2024 Deep Impact Mission Week Participant Covenant
(Every Participant MUST Complete This Form)

Mission Week Location: ______________________________ Mission Week Date: _________________
Name of Participant: ____________________________________________

In compliance with the expectations of Deep Impact Mission Weeks, I enter into the following covenant agreement as a participant in the aforementioned week.

I will exhibit a Christ-like character at all times, living in such a way that the fruits of the Spirit (Gal. 5:22-23) is evident in my words and actions. This includes the following commitments.

• I will speak kindly and use language consistent with being a follower of Christ.
• I will demonstrate respect for the rights, feelings, and property of others.
• I will respect the facility and the guidelines established for care of the facility.
• I will not consume alcohol, tobacco, vapes or illicit drugs while engaged in this ministry or event.
• I will dress appropriately, using the guidelines offered in the Guide for Appropriate Dress.
• I will assist in ensuring the safety of the environment for those around me.
• For both my protection and the protection of others, I will make every effort not to be alone with anyone during the Deep Impact week.
• I will be mindful of my interactions with others, especially at it pertains to physical contact.

I do not have any of the following that would exclude me from working with minors:

• An illness or disease that may affect my work with children or students.
• A conviction of a criminal offense.
• Been held liable to a court for a civil wrongdoing or an order made against me by a matrimonial or family court.
• Been dismissed, disciplined, move to other work or resigned from any paid or voluntary work as a result of complaints, charges or allegations that my conduct resulted in any kind of harm to children or students.

I agree to the above expectations and behaviors and know of no reason outlined above or otherwise that would keep me from ministry with children and students.

Printed Name: ____________________________________________ Date: ______________________
Participant Signature: ________________________________________
Parent/Guardian Signature (if the participant is under 18): __________________________________________________________________

Note Any Disclosures Here: __________________________________________________________________________________________

PLEASE BRING THIS FORM TO CAMP – DO NOT MAIL