



# Team Member Participant Agreement

COMPACT Family Services

Name of Participant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Missions Team: \_\_\_\_\_ City/State: \_\_\_\_\_

### CODE OF CONDUCT

I understand the Assemblies of God official statement of abstinence from alcohol, tobacco, and controlled substance use and/or abuse. In respect to God, the Assemblies of God and COMPACT, and the ministries that I will be ministering to, I will refrain from:

1. The purchase and/or use of any kind of alcoholic beverage
2. The purchase and/or use of any tobacco products
3. The purchase and/or use of any other controlled substance

(Does not include the use of personal medications, as prescribed by a doctor, or the use of necessary over-the counter medications such as Aspirin, Tylenol, etc.)

### POLICY ON CONFIDENTIALITY

As a GUEST at COMPACT Family Services I agree to honor any and all information I may learn regarding children as strictly confidential. I will not discuss confidential information with any person outside of the COMPACT staff. I recognize that any violation of the confidentiality of a child is a breach of agency policy and also a breach of confidentiality laws in the State of Arkansas. Such violation could result in legal action against me. Therefore, I agree to protect the confidentiality of the COMPACT Family Services at all times.

### CORRESPONDENCE WITH RESIDENTS

- No contact information should be given to the residents, in return no contact information should be asked from the residents, such as email, social media, etc.
- Pictures can be taken of the children and campus, however they cannot be posted on any social network, internet, or for public use.
- Our staff and residents are required to follow HIPPA and cannot discuss any personal issues about a child.

### RELEASE AND INDEMNIFICATION

For and in consideration of the undersigned's participation as a Team Member, Participant acknowledges and accepts full financial responsibility for all injury to property and personal injury sustained by Participant while on COMPACT campus. Further, Participant agrees to indemnify and hold COMPACT Family Services, 2325 Malvern Ave., Hot Springs, Arkansas, its employees, agents and representatives, harmless from and against any and all claims, demands, damages, actions, causes of actions, or suits of any kind or nature whatsoever, which might arise resulting from any injury Participant sustains while on COMPACT campus. If a dispute arises over this agreement or any claim for damages, the Participant agrees to resolve the matter exclusively through binding arbitration through the American Arbitration Association, or other nationally recognized arbitration service agreed to between the parties.

I \_\_\_\_\_, have read and understand the above policies. I promise to forego my personal convictions on these subjects in order to maintain unity and to avoid controversy in the body of Christ.

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

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

*(Required if participant is under 18 years of age)*