

Youth Covenant for Mission u July 10-12, 2026

As a participant in Mission u, I take my responsibilities seriously and affirm my commitment to my own well-being and the safety of others. I agree to remain on the site of the event or meeting unless I have been granted permission to leave by my designated responsible adult:

_____. I will attend all scheduled activities, sessions, and meals. I will observe published curfews by being in my room, being quiet, and not disturbing others. I understand that anything considered illegal for minors (persons under 18) under civil law and criminal law also applies to this event or meeting. Therefore, I will obey all laws. I will not use tobacco, illegal substances, or alcohol, nor will I possess any firearms, weapons, or fireworks. I will respect the equipment and property of others and care for the facility we share. Any damage to the facility will be the sole responsibility of the person or persons who cause the damage and the parent or legal guardian of each person responsible.

This covenant is made between each teen participant and the group as a whole. I understand that if I breach the covenant and the breach cannot be reconciled, my parent or legal guardian will be contacted, and my participation in the event or meeting may be terminated.

Signature of Teen Participant

Date

Printed Name

Parental consent:

I give my permission for my child, _____, to participate in Mission u, to be held July 10-12 at Lazy F Camp and Retreat Center, Ellensburg, Washington. I am aware of the purpose of this event or meeting and understand the scope and nature of the programs and activities in which my child will participate during the event or meeting. I have read the covenant, which my child has signed, and I understand the responsibilities they have agreed to. I will support them in fulfilling this covenant.

I designate _____ to be the responsible adult for my child during Mission u, to be held July 10-12 at Lazy F Camp and Retreat Center, Ellensburg, Washington. I have read and understand the United Women in Faith National Office policies and procedures for responsible adults.

Printed Name & Signature of Parent or Legal Guardian

Date