

2026 Standing Rock Episcopal
and Standing Rock Native YoungLife

Name _____

Parents/Guardian _____

Street Address _____ Mail Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Insurance Information _____

Policy Number _____

Any Known Allergies _____

Date of Birth _____ Gender _____

In case of emergency

Who do we call? _____ telephone number _____

If no answer: _____ telephone number _____

In case of emergency, I understand that every effort will be made to contact me. If I cannot be reached, I hereby give the Episcopal Church and YoungLife, through the leadership at this event, the permission to act on my behalf in seeking emergency care/treatment for my child. In the event such care/treatment is deemed necessary I hereby give permission to medical personnel to order x-rays, routine tests, treatment, to maintain and/or release any medical records necessary for insurance purposes as outlined under the HIPAA Regulations. I absolve the Episcopal Church and YoungLife from liability in acting on my behalf in this regard.

Signed _____ Date _____

Legal Relationship to Student _____

If you DO NOT wish to have your student's photograph used in publications, initial here _____.

This one time Registration Form is good for one year from September 2025 through August 2026. It includes Camps, YoungLife Extra, Retreats, etc. that are supervised by selected adult leadership.

Standing Rock Native YoungLife events can be found on our Standing Rock YoungLife Facebook Page and Instagram
Fr. John Floberg 701 891 2911
Tyrin Gates 605 981 7863