SURVIVOR 2026

Surviving the World. Thriving in Christ.

A ministry of Hope Family Church

⚠ IMPORTANT: This form MUST be completed in full before participation is permitted. For participants under 18 years of age, a parent or legal guardian must complete and sign this form. Participants aged 18 and older may complete and sign this form themselves.

SECTION 1 — PARTICIPANT DETAILS

First Name: _____ **Last Name:** _____

Date of Birth: _____ **Age on Event Day:** _____

Gender: _____

Home Address: _____

City / Town: _____ **Province:** _____

Email Address: _____

Cell / WhatsApp Number: _____ **Church / Youth Group:** _____

Are you a leader or participant?

☐ Leader ☐ Participant (13–17) ☐ Participant (18–25)

SECTION 2 — PARENT / GUARDIAN DETAILS (Required for participants under 18)

Parent / Guardian Name: _____ **Relationship to Participant:** _____

Cell / WhatsApp: _____ **Alternative Number:** _____

Email Address: _____

Will the participant require transport?

☐ Yes — church transport needed ☐ No — own transport / drop off ☐ Not sure yet

SECTION 3 — EMERGENCY CONTACT

Provide a contact who can be reached immediately in case of emergency. This person must be reachable on 25 July 2026.

Full Name: _____ **Relationship:** _____

Primary Cell Number: _____ **Secondary Number:** _____

SECTION 4 — MEDICAL INFORMATION

Does the participant have any known medical conditions?

☐ Yes (please detail below) ☐ No

Condition(s) / details: _____

Does the participant have any allergies (food, medication, environmental)?

☐ Yes (please detail below) ☐ No

Allergy details: _____

Is the participant currently on any chronic medication?

☐ Yes (please detail below) ☐ No

Medication name(s) & dosage: _____

_____

Is the participant able to self-administer their medication?

☐ Yes ☐ No — leader must assist (permission granted below)

Does the participant have any dietary requirements?

☐ None ☐ Vegetarian ☐ Vegan ☐ Halaal / Kosher

Other dietary needs: _____

Can the participant swim?

☐ Yes ☐ No ☐ Supervised only

SECTION 5 — PHOTO & MEDIA CONSENT

Photos and videos may be taken during the event for use on Wave Youth social media platforms, church communications, and promotional material.

I / we give permission for the participant to be photographed/filmed:

☐ Yes — full consent ☐ Yes — group photos only (no individual close-ups) ☐ No — do not photograph this participant

SECTION 6 — INDEMNITY, WAIVER & CONSENT

PLEASE READ THIS SECTION CAREFULLY BEFORE SIGNING. By signing below, you acknowledge that you have read, understood, and agree to all terms outlined in this section.

6.1 NATURE OF THE EVENT

Survivor 2026 is a one-day outdoor youth conference held on 25 July 2026 at Dungeons & Dinos. The event includes physical activities, team challenges, obstacle-style games, worship sessions, and prayer ministry. Activities involve running, light dirt interaction, outdoor terrain, and cold weather conditions as the event is held during South African winter. I understand and acknowledge the above.

6.2 ASSUMPTION OF RISK

I acknowledge that participation in outdoor physical activities carries inherent risks, including but not limited to physical injury, illness, or accidents. I understand that Wave Youth and its leaders will take all reasonable precautions; however, I accept that some risk cannot be eliminated. I voluntarily assume all such risks on behalf of the participant.

6.3 INDEMNITY & WAIVER OF LIABILITY

I hereby indemnify, release, and hold harmless Wave Youth, its leaders, volunteers, host venue (Dungeons & Dinos), and any associated church organisation from and against any and all claims, damages, losses, costs, or liabilities (including legal costs) arising from or related to the participant's attendance at and participation in Survivor 2026.

6.4 MEDICAL AUTHORITY

In the event of a medical emergency and if I cannot be reached, I authorise Wave Youth leadership and/or on-site first aiders to seek immediate medical attention for the participant, including emergency transport to a medical facility. I accept financial responsibility for any medical expenses incurred. I confirm that all medical information provided in Section 4 is accurate and complete to the best of my knowledge.

6.5 TRANSPORT

If the participant makes use of church-arranged transport, I acknowledge that at least one responsible adult leader will be present in each vehicle, and that no leader will be alone with a minor. I indemnify Wave Youth from any liability related to transport arrangements made privately by myself or the participant.

6.6 CODE OF CONDUCT

I confirm that the participant agrees to abide by the following:

- Respectful behaviour towards all leaders, participants, and venue staff
- No alcohol, vapes, cigarettes, illegal substances, weapons, or prohibited items on the premises
- Staying within designated safe zones
- Following all safety instructions from leaders and first aiders at all times

- Participants who repeatedly violate conduct expectations may be removed from the event at the leadership team's discretion. No refunds will be issued in such cases.

6.7 PRIVACY & DATA

Personal information collected on this form will be used solely for the purposes of event administration, safety, and communication. It will not be shared with third parties without consent, in accordance with the Protection of Personal Information Act (POPIA), South Africa.

SECTION 7 — DECLARATION & SIGNATURE

For participants under 18: This section must be completed by the participant's parent or legal guardian. For participants aged 18 and over: This section must be completed by the participant themselves.

I confirm that:

1. I have read and understood all sections of this registration and indemnity form.
2. All information provided is accurate and complete.
3. I voluntarily consent to the participant attending Survivor 2026 under the stated conditions.
4. I accept the indemnity, waiver, code of conduct, and all terms outlined above.

Full Name (Print) _____

(Parent/Guardian if under 18, otherwise Participant)

Signature _____

Date: _____

ID Number (optional): _____

SECTION 8 — PAYMENT CONFIRMATION

EARLY BIRD — R300	STANDARD — R350
Register & pay by 2 May 2026	After 2 May 2026

Payment includes: Full-day experience, all activities, lunch, snacks, & hot chocolate

Payment method:

☐ EFT ☐ Cash ☐ Online / Card

Amount Paid: _____

Date of Payment: _____

Proof of Payment (reference/note): _____

Questions? Contact Joshua: 072 160 3010 | Eben: 084 862 7655 | WhatsApp preferred