

B.I.C. Team Application

(form updated 4/2/22 discard all others)

Name: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Main Contact #: (_____) _____ Other Contact #: (_____) _____

Birthdate: ____/____/____ Age: _____ E-mail: _____

Your Walk / BIC #: _____ Where: _____ Sponsor: _____

Emmaus and/or BIC teams you have served on (# or LDs Name): _____

Positions in which you have served on a **BIC Team** (please indicate if you served as Head):

_____ Adt/Yth Table Leader _____ Musician; instrument(s) you play: _____

_____ Weekend Helper _____ Liturgist _____

_____ Logistics _____ Warden _____

_____ Agape _____ Cook _____

_____ LD, ALD, YALD _____ Cross Mime / Clown Communion _____

_____ Given a talk; if yes, indicate which one(s): _____

Positions in which you have served on an **Emmaus Team** (please indicate if you served as Head):

_____ Adt/Ast Table Leader _____ Musician; instrument(s) you play: _____

_____ Weekend Helper _____ Liturgist _____

_____ Stews _____ Warden _____

_____ Agape _____ Cook _____

_____ LD, ALD _____ Cross Mime _____

_____ Given a talk; if yes, indicate which one(s): _____

If you have a preference to serve on a TEEN or a YOUNG ADULT weekend, please circle one.

By submitting this form, I grant permission and consent to a background check due to working with minors.

MAIL TO:

Lori Koerner
Female & Male Team Selection Database
2104 Bedford Road
Washington, IN 47501
812-486-7428

BIC & Southwest Indiana Walk To Emmaus

ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I, _____, HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH the BIC and Walk To Emmaus including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault. I certify that I am physically able to attend this event and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by BIC and Southwest Indiana Walk To Emmaus Board of Directors, Camp Illiana staff, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

In consideration of my application and permitting me to participate in this activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity,

THE FOLLOWING ENTITIES OR PERSONS: The BIC and Southwest Indiana Walk To Emmaus and/or their directors, officers, employees, volunteers, representatives, and agents, and Camp Illiana and/or their; directors, officers, employees, volunteers, representatives, and agents

(B) INDEMNIFY, HOLD. HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by negligence or otherwise.

I acknowledge that BIC and Southwest Indiana Walk To Emmaus and Camp Illiana along with their directors, officers, staff, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Participant's Signature

Date

BIC TEAM APPLICATION INFORMATION

OK, it's great that you are interested in serving on a BIC team. Please read through the following information so you will know what this includes!!

First, you need to understand that you may not be called to work on a team for a while, probably at least one year. The way the weekends are scheduled, it is almost impossible for a new member of the community to serve on a team until the following year.

When you are called and asked to prayerfully consider serving on a team, please do just that!! Many times people react on impulse, only to find later that they have conflicts that prevent them from serving on the weekend or attending the formations. If you believe you will miss more than one formation, please consider disqualifying yourself from the team.

Formations are the preparation time for team members before the weekend begins. These formations are generally scheduled on Saturday mornings. Most teams will have 4 or 5 formations before the weekend begins. Each formation will last from 4-5 hours. These formations are an important time for team members to lift up each other in prayer and to work together to make the weekend experience as great as it was for you on your flight or journey.

Team members are expected to sacrifice as they prepare for the weekend. The commitment of time is certainly a sacrifice, not only for the formations and the weekends, but the time spent in preparation between the formations. Another sacrifice is that team members are expected to pay their weekend costs, just as the participants do. It takes money to rent the facilities and provide the food for a weekend, and all team members need to know that this is another responsibility of serving on the team.

Now that you are aware of the responsibilities, please complete the application if you are interested in serving on a team. This can be done at any time. Please mail the application to the specified person at the bottom of the form. If you want to make sure the application reaches the right people, please do it this way.

Thanks for your interest in the B.I.C. community!