

Youth Convention Participation Form

If you would like to participate in the Diocesan Convention please fill out this form and return it to Kaileen Alston, Youth Missioner, Diocese of Newark, 31 Mulberry St., Newark, NJ 07102 by Friday, December 11, 2009.♦

Participant's Name _____

Birth date: ___/___/___ Sex M F Grade in school 2009-2010 _____

Address _____

City: _____ ST/Zip _____

Email: _____

Parent/Guardian/Next of Kin _____

Congregation & city _____

I can be reached at: _____

Daytime Phone _____ Nighttime phone _____

Emergency phone # _____ Cell Phone _____

Other Contact name, relationship _____

COPY OF INSURANCE CARD & Information _____

Any chronic conditions, food allergies or other: _____

Medication : _____ Dosage _____

specific times taken each day _____

Reason for taking _____

Additional medications: _____

Date of last tetanus shot _____

Physician's name _____

Physician's phone # _____

Please list all medications (including over-the-counter or non-prescription drugs). All medications must be in the original container that identifies the prescribing physician (if a prescription drug), the name of the medication, the dosage and frequency of an administration. _____

Please check off the role(s) that you would like to fill at Diocesan Convention:

Lay Deputy (selected by Districts) Licensed Lay Eucharistic Minister*

Licensed Lay Reader* Lector

Page Sacristan Artist

Usher Greeter

Youth Ministry Ambassador Singer

Musician (which instrument(s)?) _____

* Licensed Lay Eucharistic Ministers and Lay Readers must be trained by their Rectors.

Parental Consent & Participant Covenant Form

I authorize an adult in whose care the minor has been entrusted to consent to any X-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment or hospital care, to be rendered to the minor under the general or specific supervision and on the advice of any physician or dentist under the provisions of the Medical Practice Act on the medical staff of a licensed hospital. I will be liable and agree to pay all costs and expenses incurred in connection with such medical and dental services rendered to the above-named person pursuant to this authorization.

- I hereby give permission for this person to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in this event.
- I have read and understood the Community covenant. I understand that the participant must respect and obey the instructions of the adults in charge and that no tobacco, alcohol, illegal drugs, weapons, inappropriate sexual behavior or sexually explicit communications will not be permitted at the event.
- I understand that the Diocese cannot assume responsibility for valuables or electronic equipment brought to the programs without authorization.
- I will provide transportation home for the young person if problems occur during this event.
- I will take no civil action or legal action against the adults in charge of the Diocese of Newark Program.

Diocese of Newark Program Community Covenant (Responsibilities & Regulations)

Our primary goal is to provide a safe, healthy, Christian environment for all participants. This covenant applies to ALL participants (youth, adult chaperones, clergy, etc.).

Personal responsibilities (ALL ages & roles):

- To seek and serve Christ in all people.
- Respect the dignity of every human being and to work together as a community for the benefit of the group.
- There will be no alcohol, illegal drugs, knives (this includes pocket/jackknives) or weapons brought on the premises for any reason. Possession of sexually explicit materials is prohibited. In addition inappropriate, offensive, or sexual explicit communications or statements are prohibited.
- Smoking or using other tobacco products is prohibited in all buildings, meeting rooms and sleeping areas. Smoking by youth is prohibited.
- No pets/animals are allowed except trained service dogs.
- Participants must respect personal and public property. Repair costs for damages incurred to property will be billed to the individual responsible for the damage.
- Participants are asked to refrain from making noise in common areas and sleeping rooms during specifically named times with a named curfew for each program.
- Adult Chaperones and group leaders are responsible for enforcing the rules as stated.
- Violators of this Covenant may be asked to leave and/or be sent home. These rules are not subject to interpretation and each participant is expected to follow them without exception.

Participant signature _____ Date _____

Adult or Guardian of Youth Participant

Signature _____ Date _____