

4. What School related extra curricular activities have you participated in? (i.e. Student government/council, sports, music/(band, choir), clubs, etc)

5. Are you willing to speak to issues on the Convention floor?

6. Would you be willing to help with the Workshop/Learning Opportunity that the youth are presenting at convention?

7. What would you like to know more about in order to attend convention?

8. Is there anything else you would like to tell us?

Fees: based on actual costs

Per person \$60 for 1/2 of hotel room, \$12 lunch Friday, \$60 Fri banquet, \$12 Lunch Saturday, early Regis fee \$25, regular \$50, late \$75

- | | | |
|--|---------------------------------------|----------|
| <input type="checkbox"/> We are paying the early bird registration fee of \$160. by September 11 | Enclosed is the early fee of | \$ _____ |
| <input type="checkbox"/> We are paying the regular fee of \$185 by October 15 | Enclosed is the regular fee of | \$ _____ |
| <input type="checkbox"/> We are paying the late fee of \$210, after October 17 | Enclosed is the late fee of | \$ _____ |
| <input type="checkbox"/> We would like to help sponsor a youth scholarship for this event. | Enclosed is the amount of | \$ _____ |
| <input type="checkbox"/> Additional Donation in any amount. | Enclosed is a donation of | \$ _____ |
- We would like to apply for **scholarship** assistance. We would like to participate in the Diocesan Scholarship Program. Ideally, my church will contribute 1/3rd I will contribute 1/3rd, with the Diocese paying the final 1/3rd. If this is not possible, please be in touch with us, we are willing to work out another arrangement.
- We would like to pay by credit card. **** Add \$4 per credit card transaction.** Add \$4 card processing fee \$ _____
- Circle one **VISA** **MASTERCARD** number _____ Exp date _____
- Name as it appears on card _____

****Please make checks payable to "The Diocese of Chicago"** **GRAND TOTAL** \$ _____

PARENTAL CONSENT

I give my permission for my child _____ to apply to attend the Diocese of Chicago of Chicago Annual Convention, November 21 -22, 2008, at the Westin Chicago in Lombard. I realize that they may be asked to miss school on Friday, November 21.

Signature _____ **Date** _____

PARISH PRIEST CONSENT

I recommend this person to apply to be a part of the youth delegation to Diocesan Convention.

Signature _____ Date _____

Comments:

APPLICANT AGREEMENT

I understand that if I am chosen to go be a Youth Delegate to Convention, that I must abide by all rules and norms (including refraining from using illegal drugs and alcohol, and not engaging in inappropriate sexual behavior), I will respect the hotel and the property of others, and that I will be asked to attend a mandatory orientation/overnight to prepare me for the event.

Signature _____ Date _____

Diocese of Chicago Youth Event Covenant.

The Covenant must be signed by both youth and adults

Non-negotiable rules: These Rules apply to youth and adult participants and staff

1. I will not engage in inappropriate sexual behavior, this includes: sexual misconduct, sexually explicit communication, or harassment.
2. I will not use, bring, or be under the influence of illegal drugs, or alcohol.
3. I will not smoke cigarettes.
4. I will respect the physical property of the facility and the property of each person at the event.
5. I understand that acts of violence and aggression will not be tolerated.
6. I will not enter sleeping areas of the opposite sex during the event.
7. I will not be in the possession of or use firearms, knives (including pocketknives), fireworks, or other weapons of any kind.
8. I will remain on the premises and be present for all scheduled activities for the entire event.
9. I will try new and daring things, and participate fully in all planned events.

This Covenant helps provide for the physical, emotional, and spiritual safety of the whole community, and ***a violation of this covenant is damaging to the community.*** Violations will be dealt with in an immediate and appropriate manner by the Leadership Team and/or Diocesan Youth Coordinator. Possible consequences for serious or repeated offenses may include (but are not limited to) notification of one's parents/clergy, and being sent home immediately at one's own expense and without refund.

I have read and agree to follow the rules and norms during this event.

Participant's signature _____

Please fill out completely and return by September 11, 2008 to:
Sue Cromer -Youth Ministry
65 East Huron St.
Chicago, IL 60611-2728
scromer@episcopalchicago.org

Please complete the Medical Release form on the next 2 pages if it is not already on file in the Youth Ministry office for 2008-2009

Required Signatures & Parent/Guardian Authorization

Diocese of Chicago Youth Event Covenant.

Non-negotiable rules: These Rules apply to youth and adult participants and staff, and signed by all participants & staff.

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2. I will not use, bring, or be under the influence of illegal drugs, or alcohol.
3. I will not smoke cigarettes.
4. I will respect the physical property of the facility and the property of each person at the event.
5. I understand that acts of violence and aggression will not be tolerated.
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I have read and agree to follow the rules and norms during this event.

Participant's signature _____

PARENTAL CONSENT:

I give full permission for my child to attend Diocesan Events including but not limited to: New Beginnings, Happening, Diocesan Convention, The Episcopal Youth Event, Junior High – High School Retreat, General Convention, Mission Trips, Six Flags Great America trips, Meetings and overnights in preparation for a any of the above events, Youth Council, and any other event named here: _____

I give my permission for photographs or video footage of my child to be used by the Diocese of Chicago for promotional purposes. (brochures, **website photos**, online photo albums of the event, etc. (No names are used on the website or in publicity)

I **DO/DO NOT** (circle one) give my permission for my child's address/phone number & e-mail address to be included on a participant roster of the event (for use for event participants only)

MEDICAL RELEASE:

I also give permission to the leaders of this program to secure emergency medical or surgical treatment for my child if there is insufficient time to contact me, and to secure routine, non-surgical medical care as needed.

TRANSPORTATION RELEASE:

I give full permission for my child/children to be transported to youth activities in conjunction with the above mentioned event, away from our meeting site, riding in approved vehicles, with approved drivers in the Diocese of Chicago, and to attend and participate in activities off site of our main program.

WAIVER OF LIABILITY:

I agree to hold the Diocese of Chicago and any associated agencies and persons free and waive any claims for payment for accident, injury, disability or damages to the person or property of the aforementioned child arising out of or connected with his/her participation in any activity related to his/her participation in the aforementioned activity.

Parent/Guardian Signature _____ date _____