

Be Like Jesus Camp Youth Registration Form



Name _____

Parish _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ E-mail _____

Date of Birth _____ Grade _____ Circle one: Male Female

To be completed by Pastor or Parish Youth Ministry Leader

I recommend _____ for participation in The Be like Jesus Week and will support her/him when he/she returns to the parish.

Signature of Pastor or Parish Youth Ministry Leader

Date

Registration Fee: \$75 to be submitted to parish with completed Registration Form, Code of Conduct and Parental Permission Form. **PLEASE MAKE ALL CHECKS PAYABLE TO YOUR PARISH.**

Diocese of Las Cruces
Parental Permission, Health Authorization and Release Form

Youth's Name _____

Parent/Guardian's Name _____

Primary Phone _____ Cell _____

Emergency Contact Other Than Parent/Guardian:

Name _____ Relationship _____

Home Phone _____ Cell Phone _____

HEALTH AND MEDICAL INFORMATION

Family Physician _____ Phone _____

Medical Plan _____ Plan# _____

***Do you authorize the adult leader to authorize medical treatment for your child in an emergency, as considered necessary by the attending physician? ____ Yes ____ No**

State any reasons why you do not want medical care given to your child in an emergency:

List all allergies your child has _____

List all conditions (such as allergies, seizures, asthma, diabetes) for which your child requires ongoing medication and state the type and frequency of medication given: _____

List any physical restriction or restriction for any activity on the basis of medical condition. _____

Diocese of Las Cruces

PARENTAL PERMISSION AND RELEASE AND WAIVER OF LIABILITY

I/we, parent or authorized guardian of _____
give permission for his/her participation in the **2016 Diocesan Be Like Jesus Week**, and all related activities, including but not limited to transportation to and from this youth ministry event.

Initial

_____ I/we agree to direct my/our child to cooperate and comply with reasonable directions and instructions from the Be Like Jesus Camp staff or adult volunteer leaders.

_____ I/We agree that photos of my son/daughter may be used to promote the event via the diocesan newspaper, website and promotional materials such as future brochures and promotional video.

_____ I/we agree to be responsible for all medical expenses relating to injury of my/our child as a result of his/her participation in this event, whether or not caused by the negligence of diocese/parish, youth ministry program employees, agents or volunteers or other participants.

_____ I/we understand that youth participating in Be Like Jesus Week may risk injury to the body or psyche and risk property damage of their own or others.

_____ I/We agree on behalf of myself/ourselves, my/our child named herein or our heirs, successors and assigns, to release and waive any and all claims for damages which I/we or our child may have, so as to release and discharge in advances those parties hereinafter named and further agree to indemnify, hold harmless and defend the Roman Catholic Bishop of Las Cruces, and his successors, the Diocese of Las Cruces, its officers, directors and agents, volunteers, chaperons, and/or representatives and the parish from any and all liability arising from or in connection with my/our child attending the **2016 Diocesan Be Like Jesus Week** or in connection with any illness or injury or cost of medical treatment in connection.

Signature of Parent or Guardian

Date

Print Name of Parent or Guardian

Diocese of Las Cruces - YOUTH CODE OF BEHAVIOR CONTRACT

Be Like Jesus Camp

The Diocese of Las Cruces is excited to have you participate with youth from throughout the diocese in the *Be Like Jesus Camp Week*.

This *Code of Behavior* is a contract between you, your parents and the diocese, developed as a way of assisting you in **clearly** understanding what is **expected of you** during our time together. It also serves in creating a learning experience that is a healthy and growthful one for all involved. Every participant will be **expected** to honor and uphold the *Code* throughout our weekend together.

Please read the Code carefully and thoroughly with your parent(s)/guardian and then both of you are to sign it.

- Participants and their parent(s)/guardian are responsible for the participant's actions and for any damage the participant does to the facilities.
- Be respectful of others and yourself. **Foul language, crude remarks, slurs of any kind will not be tolerated.**
- Participants are expected to attend all sessions (wearing their name tag) unless explicitly excused by the Program Director. **Lack of sleep** is NOT a valid excuse for non-attendance.
- All facilities will be respected and maintained. Trash will be disposed of properly at all facilities. Dorm rooms will be left in the same condition in which they were found. Missing or damaged items will be charged to respective participants.
- Dress is casual, modest, and appropriate, reflecting Christian values. Shoes/sandals must be worn at all sessions, meals, and gatherings.
- **No visiting by the opposite sex is allowed in private sleeping areas at any time.** Co-ed socializing will take place only in designated public areas only.
- Each day will be a busy one - making adequate sleep a necessity. Participants must be in their respective rooms by curfew time. Scheduled quiet and silent times must be honored. Only the Program Director can alter curfew times or the timing of any other scheduled activity.
- Smoking is not permitted at any time during the Be Like Jesus Camp Week.
- The purchase, possession or consumption of alcohol or drugs by participants is a major infraction and will result in immediate dismissal from the program.
- Major infractions of the *Code of Behavior* will be met with immediate dismissal from the program. Parent(s)/guardian will be contacted and be expected to pick their son/daughter up at their own expense.

PARTICIPANT: I understand and agree to follow the Code of Behavior Contract. I also understand that my parent/guardian will be notified at the time of any serious infractions requiring my dismissal from Be Like Jesus Camp Weekend that they will be required to pick me up at their own expense, *(your signature must appear below in order to participate in the Be Like Jesus Camp Week)*.

Signature _____ Date _____

PARENT/GUARDIAN: I agree that my son/daughter will abide by the rules and regulations outlined in the *Be Like Jesus Camp Week* Code of Behavior Contract. I have reviewed it and discussed the Code with my son/daughter prior to signing this form. I agree that if my son/daughter fails to consistently abide by the Code or engages in serious infractions of the Code, he/she will be dismissed from the Be Like Jesus Camp Weekend I will be expected to pick him/her up immediately at my own expense *(your signature must appear below in order for your son/daughter to participate in the Be Like Jesus Camp Week)*.

Signature _____ Date _____