

R.Y.E. 2010 Youth Registration Form

Youth: Please complete these forms and give them to the leader of the church group with which you will be attending RYE. Include a check for the remainder of your registration amount, payable to that church. In order to observe deadlines, please talk to your group leader about the time by which they need your forms and money.

Primary Group Leader: Please make a copy of all registration materials and checks for your file. Mail completed original forms along with ONE check (covering all youth and adult participants together) payable to MMS-UCC. Mail to: R.Y.E. Registrar, Missouri Mid-South Conference, 411 E. Lockwood Ave., Webster Groves, MO 63119 by May 1. Questions? Call Karin Oelzen, R.Y.E. planning team, at 314-521-7324. *Refunds will not be issued after June 1, 2010. Regular registration for youth and adults concludes May 1. Late registrations for youth will be accepted from May 2 until July 1, on a first-come, first-serve basis subject to availability of space.*

Last Name _____ First Name _____ Female Male

Home Address _____

City _____ State _____ Zip _____

Youth E-mail Address _____ Facebook URL _____

Home Phone # _____ Cell # _____ Work # _____

Church Group (name of church responsible for you at R.Y.E.) _____

Name of church group's primary adult leader also attending _____

State in which this church is located (circle one): Missouri Arkansas Tennessee South Dakota
Iowa Kansas Oklahoma Minnesota Nebraska North Dakota Other: _____

Date of Birth (mo/day/yr) _____ Grade completed by July 2010 _____

T-shirt Size (adult sizes): Small Medium Large XL 2XL 3XL

Special Needs:

- Wheelchair accessible room
- Large print worship materials
- I will need assistance moving around campus which my group will provide
- Infrared assisted listening device
- I will need assistance moving around campus which I'll need the RYE planning team to secure if possible
- Language interpretation _____
- Dietary Restriction _____
- Other Need _____

Note: Failure to properly disclose special needs could limit our ability to meet needs.

I plan to attend the ASIST training July 12-13 and will need housing the nights of July 11 July 12 July 13
(Open to those ages 16 and older. Please complete the separate ASIST registration per instructions on that form)

My Total Registration Fee: \$200=Registrations postmarked by May 1 \$225=Late Registration/After May 1

Optional: I am adding \$10 \$20 \$_____ beyond my registration fee to help youth with financial need to attend.

-----**THE PRIMARY GROUP LEADER to complete all information below this line:**-----

A \$25 space deposit was paid in advance for this registrant.

X Beyond our local church's subsidy which, if any, is included in the check provided here, an additional subsidy of \$ 67 should be provided for this registrant by this entity: Iowa Conference UCC.

TOTAL amount of \$\$\$ submitted for this registrant in this check (don't include optional extra giving): \$ _____.

TOTAL amount of \$\$\$ that RYE, at time of receipt of this form, should now have for this registrant (don't include optional extra giving): \$ _____ (includes space deposit + all submitted subsidies + participant payments)

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PARENT/GUARDIAN PERMISSION AND MEDICAL AUTHORIZATION

Full name of youth participant _____ Date of birth (mo/day/yr) _____

Primary person to contact in event of an emergency (a parent/guardian):

Name: _____ Relationship to youth: _____ Day Phone: _____

Evening Phone: _____ Cell Phone: _____ E-mail: _____

Additional person to contact in event of an emergency in which I cannot be reached:

Name: _____ Day Phone: _____ Evening Phone: _____

Name of Family Physician _____ **Phone** _____

Insurance Carrier _____ **Policy #** _____ **Group #** _____

Name of Dentist _____ **Phone** _____

Dental Insurance Carrier _____ **Policy #** _____ **Group #** _____

Are there any over-the-counter medications that you do NOT want your son/daughter given in case of illness, injury or discomfort (such as headache or stomachache) _____

Is your son/daughter under the care of a physician for... Epilepsy: Yes No Diabetes: Yes No

or any other medical condition? Please explain: _____

Any medication it is expected that my son/daughter will be taking at the time of RYE, and specific dosages: _____

Any Allergies (food, drugs, plants, insects): _____

Additional Health Information/Things of Which We Should Be Aware (surgery or serious injuries, chronic or recurring illness/medical condition, psychiatric counseling or indications, family life changes, etc.) _____

Date of Last Tetanus Shot (month & year): _____

I am aware that (full name of participant) _____ wishes to attend the 2010 United Church of Christ West Central Regional Youth Event at Parkville University in Parkville, Missouri, July 14-18, 2010, and she/he has my full permission to do so. Furthermore, my son/daughter has permission to participate in any activity of the United Church of Christ West Central Region's "Regional Youth Event."

I authorize my son's/daughter's church group leaders to administer any needed over-the-counter medications deemed by the same leaders as needed by my son/daughter, as well as any prescription medications my child may be on at RYE.

In case of emergency, my son/daughter's adult church leaders and/or other Regional Youth Event adult volunteers present have authorization to seek any medical attention necessary. I understand that every effort will be made to contact me or the additional person I have listed above as soon as possible, but that emergency action deemed necessary may need to be taken prior to my being contacted. I therefore, in accordance with the U.S. government Health Insurance Portability and Accountability Act of 1996 (HIPAA), authorize release of medical records and information to adult leaders at Regional Youth Event 2010 and hospitals, medical staff, personnel, agents and employees, solely for the purposes of medical treatment.

Parent/Guardian Signature (or youth over age 18) _____ **Date** _____

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REGIONAL YOUTH EVENT 2010 COVENANT (must be signed)

Because God calls us to be a community of faith and leaders in Christ's Church, I covenant with God and others to conduct our life together at the Regional Youth Event in a manner that promotes a community of faith.

I will participate in all activities, working together to learn and grow from my RYE experience.

I will treat all people with dignity and respect. I will respect the property of all people.

I will use the facilities made available to us with care. If I hurt or accidentally damage campus property, I will take responsibility for the damage done (and inform my advisor) and a member of the RYE Planning Team right away.

I will not bring or use alcohol and/or illicit drugs, realizing that such behavior would be destructive to Christian community and would require my dismissal. (Prescribed drugs must be left with an adult leader of your church group).

I will not smoke or use tobacco products.

I will not bring or possess weapons of any kind (including pocket knives) for the duration of the event.

I will not engage in sexual activity of any kind.

I will report all instances of sexual harassment and sexual exploitation to adult leadership.

I will not participate in or invite opposite gender visitation in the dorm rooms.

I will be mindful of my roommates' rights to privacy.

I will honor the RYE dorm and room curfews.

I WILL NOT TRAVEL ALONE AT NIGHT.

I will not leave campus unless with adult supervision or given the permission of my advisors.

Seeking to be a full participant in R.Y.E. and distract neither leaders nor other participants, I will not use a cell phone (even to text), mp3 player or iPod during plenary sessions, worship, workshops, Discovery Groups, family group times or other group activities. During these times, if I have my phone, I will either turn it off or set it on silent or vibrate.

While I am at RYE, I will remember that I am a representative of my local church and the entire United Church of Christ. I agree to engage in activities and behave in a manner that is positive and contributive to the success of RYE 2010.

I am voluntarily attending RYE 2010 and understand there are inherent risks from my participation. I hereby release, waive, forever discharge, hold harmless, defend, and indemnify RYE 2010, The United Church of Christ, my United Church of Christ Conference and Park University from any and all liability which may arise out of my participation in activities related to the RYE 2010 event, including travel to and from the event, and activities off-site.

I understand that violation of this Covenant could mean returning home at my own expense, before RYE's conclusion.

Participant Signature _____ **Date** _____

Parent/Guardian Signature _____ **Date** _____
(if participant is under 18)