

JUNIOR & SENIOR HIGH SCHOOL STUDENTS  
WITH THEIR ADVISORS

# YOUTH DAY @ CAMP SWATARA

SATURDAY, OCTOBER 16, 2021  
9AM - 4PM

THE BODY IS A UNIT, THOUGH IT IS  
MADE UP OF MANY PARTS: AND  
THOUGH ALL ITS PARTS ARE MANY,  
THEY FORM ONE BODY. SO IT IS  
WITH CHRIST. 1 CORINTHIANS 12:12



Please join us to build relationships between district youth and also between district advisors. There will be adventure games, climbing tower, insight sessions, worship, lunch and free time to enjoy Camp.

## Speakers:

**Youth: David Radcliff & Eric Landram**  
**Advisors: Mark Cunningham**

This event will be outdoors, so please dress accordingly. In the case of questionable weather, please check the youth website -- [www.ane-cob.com/youth/](http://www.ane-cob.com/youth/) or contact Donna Parcell at 215-920-6292

**Reminder:** The ANE District Child Protection Policy will be in effect for this event. All verified advisors must be on file in the District Office prior to the event start. All advisors will sign a covenant on-site at the event.

Questions? Contact Donna Parcell  
215-920-6292

**Items NOT permitted:** Anything deemed "illegal" such as: drugs, alcohol, any item construed as a weapon, or any other items which may perceptibly jeopardize the health, safety, or well-being of the group. Such items will be confiscated by adult leaders. Confiscated items will be considered as forfeited property. Any return of suitable property (after the event) will be at the sole discretion of adult leadership. To prevent either loss or theft, participants are urged not bring electronic gadgetry.

**\$20/youth**  
No charge  
for advisors  
who  
accompany  
their youth

**Deadline  
to Register-  
October 1**

Online registration  
available at [www.ane-cob.org](http://www.ane-cob.org)

**REGISTRATION FORM— Online Registration available at [www.ane-cob.org](http://www.ane-cob.org)**

**Youth Day  
October 16, 2021  
Camp Swatara**

**Congregation** \_\_\_\_\_

**Youth:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Adult Advisors:**

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**(In compliance with the District’s Child Protection Policy, adult advisors must be those listed on the Congregational Verification form on file in the District Office.)**

Total Number Registering \_\_\_\_\_

Amount Enclosed: \$ \_\_\_\_\_ (\$20 per person) Advisors are free if accompanying their youth.

*Make checks payable to Atlantic Northeast District.*

**Do NOT send Media & Medical Release Forms with registration - take them directly to the event.**

**Registration Deadline: October 1**

Mail to: Atlantic Northeast District Office  
500 East Cedar Street  
Elizabethtown, PA 17022



500 E Cedar St, Elizabethtown, PA 17022 717.367.4730

### Student Media Consents and Release Form

Throughout the year, students may be highlighted in efforts to promote ANE activities and achievements. For example, students may be featured in materials to increase public awareness of our District through our newsletter, newspapers, the web (Facebook, Instagram, Twitter), DVDs displays, brochures and other types of media.

I, as the parent or guardian of \_\_\_\_\_, hereby give ANE District and its employees, representatives, and authorized media organizations permission to print, photograph, and record my child for use in audio, video, film or any other electronic, digital and printed media.

- a. This is this the understanding that neither ANE District nor its representatives will reproduce said photograph, or likeness for any commercial value or receive monetary gain for use of any reproduction of said photograph or likeness. I am also fully aware that I will not receive monetary compensation for my child's participation.
- b. I further release and relieve ANE District, its Board of Trustees, employees, and other representatives from any liabilities, known or unknown, arising out of the use of this material.
- c. Failure to return this release form with registration will constitute approval of the above requests.

### MEDICAL RELEASE FORM

I, the parent and/or legal guardian of \_\_\_\_\_ give permission for medical treatment of the above person in the event of an emergency illness and/or accident and I release Atlantic Northeast District and all volunteer personnel from all liability or medical expense incurred. An effort will be made to contact me prior to any treatment. Where contact cannot be made, proper medical personnel have my permission to proceed as determined by medical opinion.

Please list any known allergy to medications:

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I certify that I have read the above Media & Medical consent and releases and fully understand its terms and conditions.

Event Name: \_\_\_\_\_ Event Date: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Congregation: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Signature & Date: \_\_\_\_\_ Phone: \_\_\_\_\_

# Atlantic Northeast District Church of the Brethren Congregational Verification Form 2021

The Atlantic Northeast (ANE) District Church of the Brethren Board requires each congregation that sends adult leaders and advisors, paid or unpaid, to youth events sponsored solely by the ANE to annually verify in writing that each such adult has undergone certain background checks that are required by law.

A congregational representative (Pastor, Moderator or Board Chair) needs to verify in writing (back of this form) that each adult youth leader or chaperone who will attend District-sponsored youth events has completed the following clearances, within the past three years.

1. Pennsylvania Child Abuse History Clearance (CY-113)
2. Pennsylvania State Police Request for Criminal Record Check (SP4-164)
3. FBI Fingerprint Record Check (This is needed only for paid church staff OR a volunteer who has lived in PA less than 10 years. Volunteers who have lived in PA for 10+ years must swear or affirm in writing that they have not been convicted of any crime, in another state, similar to a crime disqualifying a person in Pennsylvania).

Further, the congregational representative verifies that the results of all background checks are maintained by the congregation.

If you are a congregation from a state other than Pennsylvania, signing this document means you are verifying that the youth volunteers are in adherence to the laws of your state.

Failure to provide the written verification prior to any District-sponsored youth event will result in that congregation's youth group and leaders being denied attendance.

All paid and unpaid youth leaders or advisors who attend a District-sponsored youth event will be required to sign, at the beginning of that event, an "Advisor Covenant" confirming that they:

- Have never been charged with or convicted of child abuse or any criminal conduct relating to children.
- Have undergone, within the past three years, the above-named background checks and the results of their background checks are maintained by the church.
- Understand what constitutes "child abuse" under Pennsylvania's Child Protective Services Law.
- Understand their duty as a mandated reporter of suspected child abuse under Pennsylvania's Child Protective Services Law.
- Will not engage in any inappropriate or abusive conduct with children while attending this event.

# Atlantic Northeast District Church of the Brethren Congregational Verification Form 2021

Name of Congregation: \_\_\_\_\_

Name of Representative Completing this Form

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title of Congregational Representative: \_\_\_\_\_

Date: \_\_\_\_\_

## Names of Youth Leaders and Advisors Likely to Attend 2021 District-Sponsored Youth Events:

- |     |     |
|-----|-----|
| 1.  | 11. |
| 2.  | 12. |
| 3.  | 13. |
| 4.  | 14. |
| 5.  | 15. |
| 6.  | 16. |
| 7.  | 17. |
| 8.  | 18. |
| 9.  | 19. |
| 10. | 20. |

(Attach additional names if necessary)