

Diocese of WMa

Summer 2017 Alternative Break

July 30-August 3, 2017



Ever heard of Heifer International? They're the folks who, through your donations, give families in need throughout the world livestock to help improve their lives and lift them out of poverty. Those families then "pass on the gift" and share that livestock with their communities. Pretty cool, right? Well, Heifer has an educational farm right here in our very own diocese. This summer, a group of up to 14 middle school youth from our diocese will have the chance to learn about global poverty through immersive experiences, do service projects around the farm, and think about ways we can make the world a better place and spread the Gospel in our own communities.

Who: Youth *currently* in grades 6-8

When: July 30-August 3, 2017

Where: Heifer Overlook Farm, Rutland, MA

How Much: \$100/youth (Parishes must commit to a \$100 contribution/youth, and the diocese will cover the rest). *Scholarship money is available!* If you or your parish needs assistance, please contact Hilary for more information (hbwchurch@gmail.com).

Deadline: Applications and non-refundable \$100 fee must be to Hilary by **June 20, 2017**.

HEIFER INTERNATIONAL ALTERNATIVE BREAK APPLICATION

YOUTH INFORMATION

Youth full name: _____ Preferred First Name: _____

Date of Birth: _____ Age: _____ T shirt Size: S M L XL XXL XXXL

Address: _____

Gender: _____ Preferred Pronoun: _____

Grade: _____ Youth Email: _____

Church: _____ Priest: _____

PARENT/GUARDIAN INFORMATION

Parent/Guardian name: _____

Address: _____ Phone: _____

Parent/Guardian Email: _____

EMERGENCY CONTACT INFORMATION

Please note: Youth's parent/guardian will always be contacted first.

Contact 1 Name: _____ Relation: _____

Phone: _____

Contact 2 Name: _____ Relation: _____

Phone: _____

INSURANCE INFORMATION

Insurance Company: _____ Name on Card: _____

ID#: _____ Group #: _____

Policy #: _____

Primary Physician: _____ Phone: _____

HEALTH HISTORY

Please list any allergies and/or dietary restrictions, including reactions:

If the youth has asthma, does the youth carry an inhaler? Y/N

Does the youth carry an epipen? Y/N

Please list any prescription medications, with instructions for use. *Please note: youth must give prescriptions in original, labeled bottle to adult leaders.*

Medication	Dosage/time	Use
_____	_____	_____
_____	_____	_____
_____	_____	_____

PARENT/GUARDIAN AGREEMENT

I hereby certify that all the information contained in this registration and medical form is up to date and correct. I give permission for my child to be treated by a physician, nurse, or person appropriately trained in case of accident or illness. Also, I give permission for my child to be given the prescribed medications I have provided and also over the counter medications such as acetaminophen or ibuprofen (unless otherwise indicated).

I understand that every attempt will be made to contact the adults on this form if medical intervention is needed, beginning with the parent/guardian. Additionally, I understand that with every activity, there is the inherent possibility of risk and I do not hold the Diocese of Western Massachusetts, its leaders, employees, or volunteers liable for damages, losses, diseases, or injuries by the subject on this form.

Parent/Guardian Signature: _____ Date: _____

Photo Release

I, _____, give permission for the Episcopal Diocese of Western Massachusetts to use my child _____'s likeness in a photograph or video in any and all publications, including website entries, without payment or any other consideration. Participant and the Participant's Guardian further understand and agree that

these materials shall become the property of the Diocese and will not be returned to the Participant and Participant's Guardian. Participant and Participant's Guardian hereby authorize the Diocese to edit, alter, copy, exhibit, publish, or distribute such photo or video for purposes of publicizing the Diocese's programs or for any other lawful purpose. In addition, Participant and Participant's Guardian waive the right to inspect or approve the finished product, including written or electronic copy, wherein the Participant's likeness appears. Participant and Participant's Guardian waive any right to royalties or other compensation arising or related to the use of such photograph or video.

Parent/Guardian Signature

Date

YOUTH COMMUNITY COVENANT

The Youth Community Covenant defines a standard of behavior that provides for a safe community experience.

1. I agree that I shall not possess, use, or be under the influence of illegal drugs or alcohol during the event.
2. I agree that I shall not possess or use tobacco products during the event.
3. I agree that I will not engage in sexual activity during the event.
4. I agree not to possess or use firearms, knives (including pocketknives), fireworks, or other weapons of any kind.
5. I understand that acts of violence and aggression will not be tolerated.
6. I understand that the physical property of the facility and the property of each person at the event will be respected.
7. I understand that sexual misconduct, sexually explicit communication, or sexual harassment will not be tolerated.
8. I understand that boundaries are established to ensure my safety while at this event, and I will respect it by abiding by the boundaries set forth.
9. I understand that if I choose not to comply with any of the above, my parents will be called and the rector will be informed.

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

I have read, understand and agree to abide by the above Community Covenant.

Youth signature

Printed Name

Date

Please return registrations with \$100 program fee (checks should be made out to the Diocese of Western Ma) by **June 20** to:

Hilary Bogert-Winkler
173 Warner Ave.
Worcester, MA 01604

PLEASE do not send materials directly to the diocesan office! They need to go to Hilary first.