

Instructions for Steubenville Rochester 2010

Adult and Youth Participants

- 1)** Register online at www.partnershipforyouth.org and create a log-in account. Complete the on-line registration process, (be sure to click on the Diocese of Rapid City in the drop-down menu to register within our group), and print off the Partnership for Youth Registration/Liability Form.

- 2)** Then, go to the www.rapidcitydiocese.org and print off the Rapid City Diocesan Registration Form on the youth page.

- 3)** Next, send your \$100 deposit, (write your check out to your parish/school) and send your *Partnership for Youth form and the Diocese of Rapid City form* to your parish contact person or youth minister.

For Parish Contacts or Youth Ministers Only

- 4)** Write a deposit check out to the Diocese of Rapid City in the amount of \$100 per person in your group by March 1. The final payment of \$185 per person is due May 1st. All payments are non-refundable.

- 5)** Finally, the parish contact person or youth minister mails the two forms and money for each person to :

Provatia Potvin
Diocese of Rapid City
PO Box 678
Rapid City, SD 57709

Diocese of Rapid City Steubenville Rochester 2010

Medical Permission Form, Liability Waiver, Permission to Photograph, Code of Conduct and Cancellation Policy

Instructions: Read and complete this waiver carefully. Leave no spaces blank. This copy must be signed or you will not be permitted to travel. Please keep a copy of this signed waiver at home. By signing this waiver, you agree that you may be giving up legal rights and remedies available to you and your parent(s).

Full Name(Print Clearly) _____ Parish _____

Parent(s)/Guardian(s) _____ Age _____

Address/City/State/Zip _____

Home Phone _____ Parent Cell _____ Email _____

Health Insurance Carrier _____ Policy # _____

Group # _____ Allergies _____

Dr.'s Name _____ Medications/Medical Conditions _____

Emergency Contact Name _____ Phone _____

T-Shirt (circle one)- Men's Cut- S- M-Lg-XL- XXL **or Women's Cut-**(loose fit) -S-M-LG-XL-XXL

Roommate Preference(s) _____

Nature of Risks: I understand that travel to and from Rochester, MN may involve certain risks beyond the reasonable control of the Diocese and all parishes within it, and their respective officers, directors, volunteers and agents, chaperones or representatives associated with the Diocese of Rapid City, including but not limited to accidents, emergencies, exposure to reckless conduct of persons, and/or negligence of Partnership for Youth security and medical personnel, and the Diocese of Rapid City et al. disclaim any and all responsibility for any such risks.

Medical Permission for Participant: I hereby grant permission in the event of an emergency or accident for emergency medical care to be administered to myself during the Partnership for Youth Steubenville Conference and/or during or after transportation to a hospital or doctor for emergency medical care.

Waiver of Liability/Hold Harmless: By signing this liability waiver, I agree and acknowledge that I may be giving up important legal rights and remedies available to myself, my family, my heirs, successors, and assigns. I agree that if I incur a behavioral infraction or illness requiring dismissal from Steubenville Rochester, or there is an accident or emergency requiring my dismissal from Steubenville Rochester or Steubenville Rochester must be discontinued in the event of an accident or emergency, I will be sent home at my expense, I assume the risk of any loss of any non-refundable or additional costs associated with travel and fees for Steubenville Rochester, with no right of reimbursement or refund for any amount in connection with the Diocese, Partnership for Youth, et al.

Code of Conduct: It is expected that youth and adults will follow directions of all the Diocese of Rapid City and Steubenville North volunteers, respective officers, directors, agents, chaperones or representatives associated therein. **Males and females are not allowed in the same sleeping area.**

Cell phones, ipods, and other distracting technology are not allowed. The use of drugs, tobacco, alcohol or items that endanger people are prohibited. Language and behavior should exemplify Christian values. Respect the rights and property of others. Theft and vandalism will not be tolerated. Clothing must be modest. Any instances of lack of cooperation or insubordination will not be tolerated and will be subject to possible removal and barring from Steubenville North. Parents will be informed of such infraction(s). The participant will be flown home at the participant's expense with no reimbursement or refund.

Photograph permission: I give my permission to be photographed by Steubenville North and/or the West River Catholic and /or the Diocese of Rapid City. These photos will be use for promotional materials or publications including printed materials or website. Check here if your do not want to be photographed.

Cost: \$285. The deposit of \$100, with this form and the printed and completed form from Partnership for Youth are accepted beginning January 15, 2010. Registration and event information are at www.rapidcitydiocese.org or www.partnershipforyouth.org.

Cancellation Policy: If you find a replacement before June 1, 2010, of the same gender & age range(ex. high school, young adult, adult) there is no penalty. From June 1st-June11, if you find a replacement of the same gender& age range, there is a \$40 per change fee. If you can't find a replacement you will not receive a refund of any payments, as we have binding, non-refundable contracts for services provided for this event and must follow Partnership for Youth deadlines.

I fully understand the consequences of and sign this Registration Form, including Medical Permission, Liability Waiver, Permission to Photograph, and Code of Conduct and Cancellation Policy knowingly, freely, and willingly.

Signature of Participant: _____ **Date:** _____

Signature of Parent/Gaurdian: _____ **Date:** _____

Registration payments should be made to your parish and sent as a group. The Parish Contact Person/Youth Minister mails registration forms and payments to the Diocese. Send your deposit, payable to the Diocese of Rapid City, of \$100 with this form & the Partnership for Youth form to:

**Diocese of Rapid City, attn: Steubenville
PO Box 678, Rapid City, SD 57709.**

ALL Chaperones must have had a background check through their parish Safe Environment Coordinator prior to the event.

Adult chaperones are required for every 8 youth.

For more information: Provatia Potvin, 343-3541, ppotvin@diorc.org