

2018 MIDDLE SCHOOL DAY CAMP CATHOLIC DIOCESE OF RICHMOND

ADULT Registration Form

Select the camp you will attend:

___ July 9-13: Richmond

___ July 16-20: Norfolk

___ July 23-27: Newport News

ADULT INFORMATION

Name: _____

First Name for Nametag: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Parish Name: _____

Gender: _____ Birthday: _____ Adult T-Shirt Size: _____

EMERGENCY CONTACT INFORMATION

Name: _____

Contact Number: _____

Relationship to Participant: _____

SAFE ENVIRONMENT

All adults who participate in a youth event sponsored by the Office for Evangelization must be in compliance with the Diocesan Safe Environment Policies. Please indicate that you have completed each component listed below:

YES NO Screening One (completed every 5 years)

YES NO VIRTUS Training (completed once)

YES NO Are you a parish or school employee?

Full Legal Name: _____

**2018 Middle School Day Camp
Medical Information and Release Form**
All information is kept private and confidential

Name of Participant: _____

MEDICAL INFORMATION

*In many cases, our staff and volunteers are not familiar with the medical, physical, and/or emotional history of each participant. Please share **ANY** information relating to the participant in detail. BE AS SPECIFIC AS POSSIBLE.*

<p>Does the participant have any dietary restrictions? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Select any restrictions that apply to this participant: <input type="checkbox"/> Gluten-free <input type="checkbox"/> Peanut-free <input type="checkbox"/> Vegetarian</p> <p>List any other dietary restrictions (i.e. allergies)</p>
<p>Is the participant allergic to anything? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>List any details of allergies below (this may include food allergies, allergies to specific medications or chemicals, allergies to any substances):</p>
<p>Is the participant currently taking or has taken any prescription medication in the last 6 months? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>List the specific prescription medications, reasons for medication, and daily dosage. Indicate if the medication is currently being administered.</p>
<p>Does the participant have any emotional, physical or sensory conditions? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>List any emotional conditions that may impede participation in the event. This may include counseling, treatment for emotional conditions (i.e. depression, eating disorders), and/or family situations that may have a significant impact on the participant. List any physical and/or sensory conditions of which we should be aware of or of which need special accommodations (e.g. hearing loss, visual impairment, mobility).</p>

RELEASE OF LIABILITY AND MEDICAL RELEASE

I agree on behalf of myself, my heirs, assigns, executors, and personal representatives, to hold harmless and defend the Catholic Diocese of Richmond, its officers, directors, agents, employees, or representatives associated with this event from any and all liability, loss or damage arising from or in connection with my participation in this diocesan event.

Furthermore, I hereby warrant that to the best of my knowledge, I am in good health and assume all responsibility for my health. In the event of an emergency, I hereby give permission to transport me to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor or that my emergency contact be notified prior to any further treatment. I will not hold the Diocese of Richmond responsible for authorizing any medical treatment beyond necessary transportation to the hospital.

Adult Signature: _____

Date: _____

USE OF PICTURES AND/OR VIDEO

*I give permission for pictures and/or video of myself engaged in activities related to any Diocesan event to have those pictures and/or video posted in the Diocese of Richmond publications or websites. Names of participants **will not** be used without expressed permission from the participant. If no box is checked below, the Diocese of Richmond assumes you give permission.*

YES NO Adult Signature: _____

Date: _____

2018 Middle School Day Camp

ADULT CODE OF CONDUCT and EXPECTATIONS

Adult participants must read, understand, agree, sign and return this sheet with the Medical Information and Release form. Each participant is expected to adhere to the following principles while at the 2018 Middle School Day Camp.

Role of Chaperones

The Office for Evangelization depends on Adult Chaperones to help facilitate order and to serve as a network of support for the youth. It is important that the Chaperones be an example of obedience and cooperation with the following policies as well as with our staff and volunteers on site.

Chaperones should be constantly assessing the youth in their group to be aware of any special needs. They should feel comfortable talking and sharing with the youth. Adults should also be willing to pray with the youth in their group. Adult Chaperones are responsible for their students at all times.

Duties of a Chaperone

A Chaperone's responsibilities include, but are not limited to, the following areas:

1. Participation

- ✓ It is expected that all camp participants (youth, chaperones, camp counselors) will be present at scheduled sessions during the camp.
- ✓ At no time should a youth participant leave the site without one of their Adult Chaperones. Unless it is a planned offsite field trip, adults are strongly discouraged from taking youth off site during the camp, except in the case of an emergency.
- ✓ It is to be understood that the said adult takes full responsibility for a youth once off the site.

2. Relational Ministry and Small Group Leading

- ✓ It is expected that the adults will engage their youth throughout the day, not only making sure they are behaving appropriately, but participating with them. Adults should sit among their youth and participate with the youth during the camp, unless involved in other duties.
- ✓ Adult Chaperones will help discipline the youth and help as needed with other camp activities.

3. Alcohol, Drugs, and Smoking

- ✓ All state laws concerning alcohol and drugs will be strictly enforced.
- ✓ Possession and/or consumption of alcohol or drugs are not permitted during the camp.
- ✓ All buildings are smoke-free facilities.

4. Appropriate Dress

- ✓ All participants are expected to dress in a fashion that represents modesty, respecting other participants and our Lord.
- ✓ Clothing must cover all undergarments and midriffs. Male participants must wear shirts at all times during the camp. *This does not apply to the day spent at the water park.*
- ✓ Adult Chaperones are expected to communicate these expectations to the youth and camp counselors and enforce the dress code at all times.

5. Insubordination

- ✓ It is expected that youth and adults will follow the direction of all staff and volunteers.
- ✓ Any instances of lack of cooperation or insubordination will not be tolerated and will be subject to appropriate discipline.
- ✓ The first and primary method of dealing with discipline problems will be to work through the Group Leader.
- ✓ The Catholic Diocese of Richmond reserves the right to deny entrance to, or request the ejection of any group or individual who does not comply with the regulations and policies for the 2018 Middle School Day Camp.

I have read, understand, and agree to the above principles. Any violation of the above principles may result in immediate dismissal from the Middle School Day Camp.

Adult Signature: _____

Date: _____

Printed Name: _____

Parish: _____