

2010 Young Women's Discipleship Camp

for Jr & Sr High School Girls

starting at 9:30 am

on **THURSDAY June 17**

ending at 5:00 pm on **FRIDAY June 18**

at the **Center for Youth Ministry** [near Renville]



In two days you can STRENGTHEN YOUR LEADERSHIP potential:

- % Separate tracks for junior and senior high school girls.
- % Basic skills for Christian leadership.
- % Learn how to minister to your peers.
- % Be inspired by the Scriptures to get more in touch with God.
- % Meet other youth from the diocese and sharing ideas with them.
- % Be challenged to love yourself and others.

REGISTRATION FORM - Young Women's Summer Discipleship Camp June 17- 18, 2010

**RETURN THIS
FORM &
REGISTRATION
FEE BY**

MAY 28 TO:

Cindy Blickem
1400 6th St. N
New Ulm, MN 56073
507-359-2966
Fax 507-354-3667
cblickem@dnu.org



Please specify your t-shirt size (adult sizes):

S _____
M _____
L _____
XL _____
2X _____

COST: \$50 if paid by May 28 or \$60 after that date and only if room is available.
There will be a limit of only 30 youth accepted. Please register early!!!

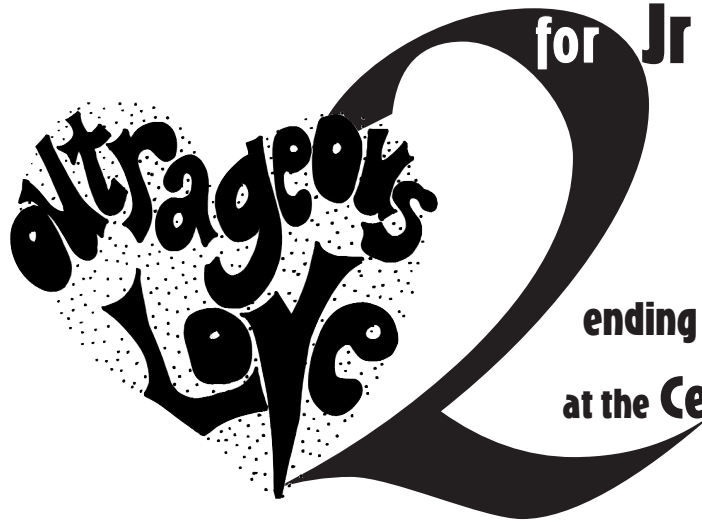
Name _____
Address _____
City, State, Zip _____
Phone (_____) _____
E-mail Address _____
Grade in Fall of 2010 _____
Parent(s) Name(s) _____

Amt Enclosed \$ _____ Make checks payable to: Diocese of New Ulm

PLEASE NOTE: If you are registering after May 28 you will need to call our office first to be sure there is still room, 507-359-2966, Cindy Blickem or Sr. Margaret McHugh (Diocesan Youth Ministry Office).

CANCELLATIONS may be made by calling our office no later than noon Friday, June 11, for a half refund. Cancellations after noon on June 11, no fees will be refunded. We order food and materials for those that pre-register with us. When people cancel out, we still have the expense for food and materials that cannot be returned.

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Name _____

Address _____

City, State, Zip _____

Phone (_____) _____

E-mail Address _____

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DIOCESE OF NEW ULM - SUMMER DISCIPLESHIP CAMPS 2010

PERMISSION SLIP

PARENT

I, _____,
 Parent () Guardian ()
 give my permission for my child/ward,
 _____,
 Son () Daughter ()

to participate in the Summer Discipleship Camp to be held at the Center for Youth Ministry near Renville, MN, on June 17-18 or June 24-25, 2010, I warrant that my child/ward is in good health.

In consideration of my child/ward's participation, I agree to indemnify the parish/school and the Diocese of New Ulm from any claims or law suits brought against the parish/school/Diocese of New Ulm by myself, my child/ward, or others that arises out of any behavior by my child/ward at the event/activity described above. I also agree to pay reasonable attorney's fees or expenses incurred by the parish/school and the Diocese in defense of such a claim/suit.

I agree that I am responsible for my child/ward's conduct and actions. The event sponsor is not responsible for any injury or damage incurred or caused by my child/ward. I understand that my child/ward is required to comply with the Code of Conduct provided by the Diocese while participating in the event. I understand that if my child/ward violates the Code of Conduct he/she may be required to be transported home at my expense and I agree to be financially responsible for any damages incurred by my son/daughter while in attendance.

EMERGENCY MEDICAL TREATMENT: In the event of an emergency, I give permission to transport my child/ward to a hospital for medical treatment. I agree to allow my child/ward to receive emergency medical treatment at my expense at the discretion of the event sponsor. I wish to be advised prior to any further treatment by a doctor or hospital.

VIDEO/PHOTOGRAPH PERMISSION

I/We consent to the use of any video images, photographs, audio recordings, or any other visual or audio reproductions that may be taken of our child/ward during the event to be used, distributed, or shown as the Diocese of New Ulm sees fit.

As a Parent/Guardian, I agree to all of the above stated considerations and conditions:

X _____
 Parent/Guardian's Signature

MEDICAL RELEASE INFORMATION

(Please Print)

My child/ward's birthdate: _____

My child/ward is allergic to _____

My child/ward must take the following medications:
 (indicate dosage, frequency, etc.)

You should be aware of these special medical conditions of my child/ward:

Insurance Company _____

Policy Carrier _____

Policy Number _____

Date of Last Tetanus Booster _____

In Case of Emergency Notify _____

Relationship to child/ward _____

Home Phone () _____

Office Phone () _____

Cell Phone () _____

OR

Relationship to child/ward _____

Home Phone () _____

Office Phone () _____

Cell Phone () _____

X _____
 Signature of Parent/Guardian Date

CODE OF BEHAVIOR

1. I will respect the property of others and all program facilities and property.
2. I will be on time for check in and departure times.
3. I may not use nor possess alcoholic beverages, tobacco products, and/or any controlled/illegal substance.
4. I will not bring ipods, MP3 players, stereo equipment, boomboxes, computer games, televisions, cell phones, etc., to camp. (If bring cell phone, for parental contact only.)
5. I will not bring explosives or anything that could harm another person or property to camp.
6. I will follow the schedule and all appropriate instructions of all personnel aiding this event including but not limited to chaperones, support staff, transportation personnel, and administration.
7. If I damage camp property, I (or my parents/guardian) am responsible and must make restitution.
8. Littering is prohibited throughout the camp; as is any carving, damage to wildlife, damage to plants, etc.
9. I agree to full participation in the program.
10. I agree to respect my peers by listening to others and allowing their opinions and points of view to be shared.
11. I will treat all other people with respect, not cause any intentional harm (physically, emotionally, mentally, or spiritually) to any other person in any way.
12. I understand that "lights out" will be strictly enforced at the time indicated in the schedule.
13. I understand that camp will be fun, inspirational, a time to learn some skills for leadership, and to get more in touch with God.

As a member of the Diocese of New Ulm, I understand and agree to the above Code of Behavior. I realize that I am representing my family, my church, and the group with whom I am attending this event. My behavior will be respectful of all people and of myself. I also understand and agree that I will notify my parents/guardian at the time of any infractions requiring my dismissal from the camp and that I will be sent home at my own and/or my parent/ guardian's expense.

X _____
 Youth, signature Date
 Grade in Fall of 2010 _____

- Young Women's Summer Discipleship Camp** June 17-18, 2010
 Young Men's Summer Discipleship Camp June 24-25, 2010

RETURN COMPLETED FORM BY MAY 28 TO:

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 1400 6th St. N, New Ulm, MN 56073
 cblickem@dnu.org Fax 507-354-3667 Phone: 507-233-5325