

REGISTRATION FORMS AND
INFORMATION FOR PARTICIPANTS





Unity Worldwide Ministries Eastern Region YOU Spring Rally 2022

April 29-May 1, 2022

5 PM FRIDAY-12 PM SUNDAY

For high school age teens, YOU sponsors, parents, chaperones and Ministers
YMCA Camp Tockwogh, MD
On the Eastern shore of the Chesapeake Bay near Worton, MD

Early bird Registration (\$225.00) Due by March 15, 2022

Late Registration (\$245.00) Between March 16-March 31, 2022

Registration closes at midnight on March 31, 2022

No registrations or payments can be accepted after March 31, 2022

No refunds after March 15, 2022

During this retreat participants will experience:

- A welcoming environment of love and acceptance
- Spiritual growth & transformation
- Fun & engaging large & small group activities
- Prayer, meditation, campfire vespers & silent Godwalk
- Music throughout the weekend
- All activities led by teens including "Truth Talk" Lessons
- Free time activities such as nature walks, climbing wall, archery and basketball
- A beautiful setting on the Chesapeake Bay

Chapter Registration available at www.unityeasternregion.org

Registration is online only, by chapter. Chapter registration must be signed and approved by Church minister, Youth and Family Director and attending sponsor. Individual registrations will be refused. After Chapter registration is complete each participant will receive a link to complete their individual registration online. Individual registrations must be completed by participant for registration to be valid.

Contact Janell Renshaw, youthconsultant@unityeasternregion.org or 407-466-9388

INFORMATION ABOUT RALLY

WHO MAY ATTEND?

Eastern region YOU'ers, sponsors, ministers, teachers, youth ed directors, parents and chaperones are all invited to join in a weekend of fellowship, fun, and Spiritual growth. YOUers must be in grades 9,10,11 or 12 or equivalent, with a minimum age of 14 and a maximum age of 19; or, if not in high school, a maximum age of 18. Teens must be accompanied to Rally by a ministry-approved adult 25 years or older of the same gender as the teen(s). Any exceptions must be approved by the Regional Consultant.

All Adults attending must submit a copy of a national background screen within last 3 years with their registration if it has not been previously provided.

WHERE IS THE RALLY?

Rally is at YMCA Camp Tockwogh on the eastern shore of the Chesapeake Bay. The address is: 24370 Still Pond Neck Rd, Worton, MD. Phone: (410) 348-6000. Please note that while our group often has the camp to itself, it is also not uncommon to share the camp and dining hall with other youth groups and their adult chaperones.

GENERAL INFORMATION:

- Check-in will be from 5:00 to 6:00 PM Friday. Please arrive during that time period so that your chapter will not miss the important 6:30 pre-Rally meetings and opening activities at 7:00pm.
- **Friday Dinner is included** - Please arrive by 5:00 pm to participate in dinner.
- ALL PERSONS registering for the Rally are committing to be in attendance for the ENTIRE WEEKEND, arriving at the camp on Friday afternoon and staying through the closing on Sunday.
- Rally will end at about Noon on Sunday. Most Rally participants meet for Sunday lunch after Rally at a nearby Pizza restaurant if you so choose. Please bring cash for Love Offering and optional Sunday lunch.

WHAT TO BRING?

Sleeping Bag, Blankets, Bed Linens, Towel, Washcloth, Toiletries, Comfortable Casual Clothes, Jacket and Raingear, Closed Toe Shoes, Flashlight & Batteries, Sporting Gear (Optional): Basketball, Frisbee, Football, Soccer Ball, Regional Love Offering for Sunday Service and small amount of expense money.

- Please leave Valuables, Skateboards, Squirt Guns, Electronic Games/devices, computers at home.
- Neither the Rally Leadership, Region or Camp Tockwogh will be responsible for lost or stolen items.

FEES, PAYMENTS AND DUE DATES: Registration is online only, by Chapter. Chapter registration must be signed and approved by Church minister, Youth and Family Director and attending sponsor. Individual registrations will be refused. After Chapter registration is complete each participant will receive a link to complete their individual registration online. Individual registrations must be completed by participant for registration to be valid.

Register by Chapter Online at www.unityeasternregion.org

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QUESTIONS? Janell Renshaw Youth Consultant,
407-466-9388 youthconsultant@unityeasternregion.org

YOU & SPONSER REGISTRARTION FORMS

THESE FORMS WILL BE UPLOADED DURING YOUR ONLINE REGISTRATION PROCESS. PLEASE COMPLETE FORMS BEFORE STARTING YOUR ONLINE REGISTRATION

FORMS TO BE COMPLETED BEFORE STARTING YOUR INDIVIDUAL ONLINE REGISTRATION. REGISTRATION FOR RALLY IS INCOMPLETE UNTIL YOU HAVE COMPLETED YOUR ONLINE REGISTRATION WITH THE ACCOMPANIED FORMS:

- | | |
|--|--|
| 1. Medical/Liability Release Form (2 page form) | 1 for each Participant signed by Participants 18 and older and Parents of YOU'ers 17 and younger |
| 2. COVID 19 Release Wavier | 1 for each participant signed by participants 18 and older, or parents of YOU'ers 17 and younger |
| 2. YMCA Facility User/Visitor Agreement | 1 for each participant |
| 3. Copy of Background screening | 1 for each Adult attending Rally dated within 3 years of Rally |

Other Forms for information :

- Qualifications / Responsibilities for Logistics Team, 1st-Timer Buddies & Family Group Leaders (Please provide to qualified YOUers and encourage your YOUers to serve.)

DUE DATES AND REGISTRATION FEES:

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First-Timer Buddies / Logistics Team Members Qualifications and Responsibilities

Logistics Team and Buddy Qualifications:

- Has attended at least 1 prior Rally and active member of Chapter
- Has shown integrity keeping the Heart Agreement and an understanding of Unity Principles
- Buddy: An open heart and sufficient social skill/maturity to carry out Buddy Responsibilities.
- Logistics Team: Has maturity/ and physical capability to fulfill Logistic Team Responsibilities
- Recommended by Sponsor to serve as a First-Timer Buddy or Logistics Team Member

Buddy Responsibilities

First-Timer Meeting:

A meeting of First-Timers and Buddies will be held at 6:30pm on the Friday of Rally. Arrive on time to attend the meeting. Come to the meeting ready to welcome first-timers and show enthusiasm. There will be get-acquainted activities for Buddies and First-Timers.

During Rally:

1. Help your first-timer in any way you can with the registration and settling in process. (Finding their Cabin / providing any information or help needed.)
2. During Rally, introduce your first-timer to your friends and invite first timers to join you in meals and activities.
3. When you see your first-timer during rally, ask how their experience with Rally is going - What they've enjoyed or struggled with. Share your Rally experience with them.
4. If you see your first-timer sitting or standing alone or looking lost or awkward, go up to them and talk to them. Invite them to join you and your friends.
5. Be to your First-Timer the type of friend you would have appreciated having during your first Rally.

Logistics Team Responsibilities

Logistics Team Meeting

Check In with Adult Logistic Team Leader when you arrive at Rally. Attend any scheduled Team meetings at the beginning of Rally.

During Rally

The logistics team is available to assist the Regie Team and adult logistics leader with any and all logistics including room break down & set up (setting up/taking down tables and moving chairs) room cleanup, distributing supplies whenever needed.

LT members return to Meeting room promptly at the close of activities in the evening to set up room for the next day. Members may be **briefly** delayed returning to cabins in the evening and must have maturity and responsibility to accomplish focused work without delay or dawdling.

LT members may be asked to assist with Talent show set up/ Cleanup and/or Snack setup and cleanup.

At mealtimes, LT Members serve as Role Models by cheerfully assisting with cleanup and encouraging all YOUers to do their share.

LT Members put Team responsibilities and support of the Rally before their own personal Rally experience. (Leaving Fuzzies early if necessary to break down/setup room in the evening, or help with loading supplies into vehicles at the end of Rally)

Thank you for serving and spreading the Love!!!

Family Group Leaders Qualifications and Responsibilities

Qualifications

- Has attended at least 2 Rallies
- Is at least 15 years of age at time of Rally
- Sufficiently articulate to fulfill Family Group Leader Responsibilities
- Has attended past leadership Trainings (Recommended but not required)
- Has demonstrated maturity and understanding of Unity Principles
- Has demonstrated Leadership Qualities in home chapter and/or church

Responsibilities

Prior to Rally

Spend time in daily meditation and/or prayer practice prior to coming to Rally
Review all family group materials carefully and thoroughly prior to coming to rally.
Participate in pre-Rally phone conference if requested by YOU Consultant

During Rally

Attend 6:30 Family Group Leader meeting
Be a positive role model for Family Group and entire Rally body
Live and express Unity principles in all words and actions
Be prepared and on time for each Family Group meeting
Listen with an open heart and mind to any feedback from Adult Sponsors in Family Group

PRINT & COMPLETE THE NEXT FIVE PAGES TO UPLOAD FOR
YOUR ONLINE REGISTRATION

Youth & Adult Medical/Liability Release

Eastern Region Youth of Unity

Complete form in **INK**. Original copy sent with Registration. One Copy to be carried with participant to event.

Participant _____ Birth Date ___ / ___ / ___ M F Age _____
Parent/Legal Guardian _____ Relationship _____
Address _____ City, State _____ Zip _____
Home Phone (_____) _____ Work/cell (_____) _____ E-mail _____
Emergency contact(s) if parent cannot be reached _____
Relationship _____ Phone (_____) _____ (_____) _____

MEDICAL HISTORY

I certify that the above named person is in good health and able to participate in all normal activities of the group.

Yes No If no, specify limits of participation. _____

Allergic to any substance, food or medication? Yes No (If Yes, specify) _____

Is the participant currently under a doctor's supervision for: Epilepsy Diabetes Asthma or ADD/ADHD

Any other medical conditions: _____

List **ALL** current medications with dose and frequency _____

_____ Date of last Tetanus shot _____

Please list all OTC medication participant may have: _____

Note: Benadryl is only Allergy Medication stocked in First Aid Kit due to cost and frequency of use.

Group leaders must be informed of any prescription medication brought by participant with clear information as to proper use and dosage. If medication is "as needed," the participant must understand the symptoms of their condition and know when to ask for help.

INSURANCE INFORMATION, MEDICAL CONSENT & LIABILITY RELEASE

Family Physician (name & phone number)

Medical Insurance Company _____

ID Number _____

Group Number _____ Policy Holder Name _____

Phone # to verify coverage or submit claim _____

As the above-named participant (or legal guardian if the participant is a minor under the age of 18), I hereby attest that I have read this complete document; all information provided is complete and true; I have legal standing to make decisions which affect the rights of the above-named participant; and I understand and consent to all terms outlined on both pages of this document (including release of photographic images & personal information as described herein).

I hereby voluntarily and knowingly assume all risks and dangers inherent and incidental to Youth Ministry activities and travel understanding that some activities may pose a risk of injury. I will not hold liable the Church, the Eastern Region Association of Unity Churches and/or the Association of Unity Churches their employees, agents and event group leaders for any injury, illness or property damage involving the above-named participant no matter how caused. Whenever deemed necessary by group leaders, I authorize the calling of a doctor and/or the providing of other medical services and, unless covered by insurance, agree to pay for same. If the above-named participant is incapacitated or under age 18, I do hereby authorize group leaders as agent for the undersigned, to consent with respect to such participant to any x-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment, and hospital care which is deemed advisable by a licensed physician or surgeon.

Signature (Participant, or Parent/Guardian if under age 18)

Signature below each release constitutes agreement.

Participants Name _____ Date _____

Photography Release: I understand that I may be photographed as a participant in ministry activities. I hereby assign all of my rights, title and interest in and to any photographs and videotape images to the ministry. I grant the ministry and its representatives permission to use, without compensation or restriction, photographs and videotape images (from all Unity events) in which the participant appears, in any manner whatsoever such as, but not limited to: publication, display, advertising, slide shows, etc.

I specifically authorize the ministry to reproduce, publish, and distribute copies of said photographs or videotape images, as well as authorize the ministry to submit said photographs for publication by the Association of Unity Churches International, dba Unity Worldwide Ministries, and its conference regions.

I understand that no compensation for efforts or participation of the above named participant is promised or implied. I do hereby release to the ministry, Unity Worldwide Ministries and its conference regions any and all interest in and to any proceeds from the sale or production of photographic or videotape reproductions.

Signature (Participant, or Parent/Guardian if under age 18)

Confidentiality Release: I understand that health information on this form will only be shared, as needed, with group leaders, church staff and medical professionals to safeguard and support the participant. This information will not be publicly disseminated or released to any outside organization. However, since it is common practice for the Church (or Eastern Region) to publish a participant's phone and email if they actively participate in the group (or attend a regional event), I authorize the Church (and Eastern Region) to publish such information on a local (or event) roster.

Signature (Participant, or Parent/Guardian if under age 18)

Communication Release: For effective communication, we would like to send you text messages for important reminders that are happening in the Unity Eastern Region.

Signature (Participant, or Parent/Guardian if under age 18)

Parent/Legal Guardians Approval: (Parent/Legal Guardian of ALL YOUers must sign) *My signature below indicates approval for my teen to attend _____ Eastern Region Youth of Unity event. I have read the Group Agreements for this event and understand the consequence of inappropriate behavior by my teen means he/she may be sent home at my expense.

Signature (Participant, or Parent/Guardian if under age 18)

COVID-19 INFORMATION AND RELEASE FORM

Since March 2020, COVID-19 has restricted all YOU rallies to be conducted virtually. **We are excited that Spring Rally 2022 will be the first in-person YOU rally since October 2019!** We are so looking forward to seeing everyone!!

However, we know that the virus and its variants are still out there, and we do want to be sure that we act prudently to ensure everyone's safety. In that vein, while vaccinations will not be required to attend the rally, we do encourage everyone to get vaccinated to protect yourself and your loved ones. **A negative Covid-19 test is required within 72 hours before rally.** If for any reason you are not feeling well regardless of your test results, please stay home and be well. We will follow camp and local state guidelines regarding all Covid-19 policies.

We also recognize that there is a potential risk that someone might become infected with the virus. Accordingly, please read carefully and sign the appropriate COVID-19 Release below.

COVID-19 LIABILITY RELEASE FOR YOUers UNDER 18

As legal guardian of the below-named minor, I recognize that there is a potential risk of COVID-19 infection during rally. I understand that reasonable measures will be taken to safeguard the health and safety of the below-named participant and that I will be notified as soon as possible in case of such an infection. I agree to indemnify and hold harmless from responsibility the camp, the Unity Eastern Region and the Association of Unity Churches Inc. (d/b/a Unity Worldwide Ministries), their employees, agents and event/youth group leaders for any COVID-19 related illness involving the below-named participant.

I have read this complete document and I understand and consent to all terms contained herein.

Name of YOUer: _____

Parent/Guardian Signature: _____ **Date:** _____

Parent Printer Name _____

COVID-19 LIABILITY RELEASE FOR YOUers 18 AND OVER

As a YOUer aged 18 or over, I hereby attest that I have legal standing to make decisions which affect my rights. I recognize that there is a potential risk of COVID-19 infection during rally. I understand that reasonable measures will be taken to safeguard the health and safety of the below-named participant and that I will be notified as soon as possible in case of such an infection. I agree to indemnify and hold harmless from responsibility the camp, the Unity Eastern Region and the Association of Unity Churches Inc. (d/b/a Unity Worldwide Ministries), their employees, agents and event/youth group leaders for any COVID-19 related illness involving the below-named participant.

I have read this complete document and I understand and consent to all terms contained herein.

YOUer Signature: _____ **Date:** _____

Printed Name: _____

COVID-19 LIABILITY RELEASE FOR SPONSORS/CHAPERONES

As legal guardian of the below-named minor, I recognize that there is a potential risk of COVID-19 infection during rally. I understand that reasonable measures will be taken to safeguard the health and safety of the below-named participant and that I will be notified as soon as possible in case of such an infection. I agree to indemnify and hold harmless from responsibility the camp, the Unity Eastern Region and the Association of Unity Churches Inc. (d/b/a Unity Worldwide Ministries), their employees, agents and event/youth group leaders for any COVID-19 related illness involving the below-named participant.

I have read this complete document and I understand and consent to all terms contained herein.

Signature: _____ **Date:** _____

Printed Name: _____



YMCA Camp Tockwogh
FACILITY USER/VISITOR AGREEMENT

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Name
Gender: DOB Month: Day Year
Address
City State Zip Code
Home Phone EMAIL

IN CASE OF EMERGENCY, PLEASE NOTIFY: Name
Phone Relationship to participant

I agree to follow all rules and regulations at all YMCA of Delaware facilities including at Camp Tockwogh ("YMCA") while in, upon or about the premises or while using or observing the premises or any facilities or equipment, or participating in any program affiliated with the YMCA of Delaware including Camp Tockwogh, and understand and agree that I may be expelled at any time, with no refund of any monies paid, for failure to abide by such rules and regulations.

IN CONSIDERATION OF BEING PERMITTED TO UTILIZE ALL YMCA OF DELAWARE FACILITIES INCLUDING CAMP TOCKWOGH, SERVICES AND PROGRAMS OF THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA of Delaware facilities including Camp Tockwogh, I HEREBY AGREE TO THE FOLLOWING:

1.I UNDERSTAND THAT ACTIVITIES AT YMCA OF DELAWARE FACILITIES INCLUDING CAMP TOCKWOGH OR ELSEWHERE, INCLUDING USE OF EQUIPMENT AND PARTICIPATION INPROGRAMS, CAN INVOLVE MOVEMENT, STRAIN AND OTHER ELEMENTS THAT CREATE RISK OF SERIOUS INJURY OR DEATH. I HEREBY ASSUME FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE OR LOSS, regardless of severity, that I or my minor child/ward may sustain from my or my minor child/ward's presence in, upon or about the premises or while using or observing the premises or any facilities or equipment, or participating in any program affiliated with the YMCA of Delaware including Camp Tockwogh, except for any injury, damage or loss that is caused solely by the YMCA's gross negligence.

2.I, FOR MYSELF, ANY PERSONAL REPRESENTATIVES, ASSIGNS, HEIRS AND NEXT OF KIN, HEREBY FULLY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the YMCA, its operating centers, their respective officers, directors, Managers, Trustees, members, volunteers, employees, agents or representatives (the "Releasees") and each of them from any and all claims for injuries, damages or losses that I or my minor child/ward may have or which may accrue to me or my minor child/ward from my and/or my minor child/ward's presence in, upon or about the premises or while using or observing the premises or any facilities or equipment, or participating in any program affiliated with the YMCA of Delaware including Camp Tockwogh, except for any injury, damage or loss that is caused solely by the YMCA's gross negligence.

3.I HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the YMCA and each of them from any loss, liability, damage or cost they may incur from my or my minor child/ward's presence in, upon or about the premises or while using or observing the premises or any facilities or equipment, or participating in any program affiliated with the YMCA of Delaware including Camp Tockwogh, except for any loss, liability, damage or cost that is caused solely by the YMCA's gross negligence.

I further expressly agree that the foregoing ASSUMPTION OF RISK, RELEASE, AND WAIVER is intended to be as broad and inclusive as is permitted by the law of the State of Maryland and if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THIS AGREEMENT APPLIES TO ALL PAST, PRESENT AND FUTURE VISITS AND USES BY ME TO ANY YMCA OF DLEAWARE FACILITIES INCLUDING CAMP TOCKWOGH OR PROPERTY. I HAVE READ AND VOLUNTARILY SIGNED THIS ASSUMPTION OF RISK, RELEASE, AND WAIVER, and further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE AGREEMENT.
THIS AGREEMENT CONTAINS A WAIVER AND RELEASE.

SIGNATURE (Participant's signature)

DATE

SIGNATURE (in the case of a minor only: Parent's or Guardian's signature)

DATE