



Vincentian Marian Youth

751 Center Drive
Ste. Genevieve, MO 63670
www.southcentralvmy.us
vincentianmarianyouth@gmail.com
573-883-7200

Adult Operation Overhaul Participation Packet

Dear Operation Overhaul Participant,

We are very excited about having you join us for this upcoming service event. Please follow the instructions below to assure all forms are completed and returned with your deposit to secure your spot.

We have put a lot of planning into this and are excited and looking forward to our time together. This will be packed with fun, faith formation, making of new friends and a week of service that you will always remember!

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- All attached forms are due by the early bird date of **April 1**.
 - A **\$50.00 deposit** should be attached to the forms.
 - A final payment due by May 15 to avoid an additional \$50.00 fee.
 - To save you and VMY time and additional mailings, it is recommended to send a **post dated check** for the remaining balance due May 15th. The check will be held until then..
 - No registrations can be accepted after May 15.
 - Any service forms, or money in youth accounts must be considered prior to sending in payments. Participant is responsible for contacting the youth minister, VMY director, or Labour Exchange manager the monies are with, to determine the usable account balance.
 - Adult Participants Only:** We will need a black and white copy of your driver's license included with the return forms.

VMY Event Name _____ **Current Year** _____

Adult Information

First Name _____ Preferred _____ Last Name _____
Address _____ City/State _____ Zip _____
Cell _____ Date of Birth _____ Sex: (Circle) M / F
Shirt Size: (Circle one) S - M - L - XL - 2XL - 3XL - 4XL (XS not available)
Email _____
Place of Employment _____

Medical Information

Physician _____ Phone Number _____
Allergies _____

Will you be taking medication at the time of this event? Yes _____ No _____ List if yes: _____

Additional Information: _____

Please carry a copy of your insurance card with you or make a copy of it.

Emergency Contact Information:

Name: _____
Relationship: _____
Cell: _____ Other: _____

Agreements

- I, _____, in signing this form, hereby state that the information included in this form is correct and true.
- I understand that I will be part of the Vincentian Marian Youth staff and/or volunteers.
- I, in accordance with the guidelines of Vincentian Marian Youth, will follow, support, and enforce guidelines as written and stated.
- I recognize that there are risks inherent in participation in any activity and agree to hold Vincentian Marian Youth, its affiliates, and its employees, volunteers and agents, harmless from any injury, damage to, or loss not caused by the negligence or misconduct of the Vincentian Marian Youth, its affiliates and its and their employees, volunteers and agents.
- In the case of medical emergency, I hereby give permission to be evaluated, diagnosed and treated in accordance with standard medical practice by licensed medical personnel.
- For good and valuable consideration, the sufficiency of which is hereby acknowledged, I, the undersigned grant Vincentian Marian Youth (VMY) the right to publish, reproduce and display photographic images, video images and/or audio recordings of myself for use in all media, electronic or otherwise, in connection with publications, advertisements and/or web pages of VMY, provided that VMY is not authorized to sell or otherwise distribute such photographic images, video images or audio recordings to any other person or entity without my consent. I understand that VMY may associate the photographic image, video image or audio recording with my name and the name of the organization of which I am a part of. I further acknowledge and agree that I shall have no ownership interest in any informational or advertising material which utilizes, incorporates or consists of the photographic images, video images and/or audio recordings or in any copyright embodied therein.
- I understand that for all Youth Ministry activities there is a zero tolerance policy for the use of any mood altering chemicals (including alcohol and illegal drugs), foul language, and threats of any type, abuse, and inappropriate language and physical conduct. I agree to follow this policy.

Adult Participant Signature _____ Date _____

Remember to securely attach all forms, registration fee and a black and white copy of your driver's license and return to:

VMY ~ 751 Center Dr. ~ Ste. Genevieve, MO 63670

VINCENTIAN MARIAN YOUTH – SOUTHEAST MISSOURI
CHAPERONE RESPONSIBILITIES AND GUIDELINES

- Chaperones are expected to review & understand the responsibilities and guidelines for VMY events. It is to your benefit to make the meeting scheduled prior to each large event to receive instructions and to clarify questions.
- Get to know your teens and help them get to know each other. Making friends early will enable a more enjoyable and rewarding experience for everyone.
- It is very important to mingle and talk with the teens throughout the event, not excluding travel time, meals, and free time.
- Never be alone with a teen at any time or under any circumstance, two chaperones at all times.
- Tell your assigned teens to inform you before leaving the premises/larger group at all times.
- If you are unsure of anything during an event, ask the VMY leader for clarification. Our events and programs are well prepared and planned for teens. There are reasons for what we do and/or changes that we make.
- You may discuss with a teen or teens topics with which you are comfortable. It is mandatory to report incidents of abuse or self harm. If it is mentioned by a teen you must inform a VMY leader.
- Empower the teens to lead and learn new skills with tools, task, praying, etc. Positive reinforcement helps instill good development when making good decisions.
- All teens are to be trusted & respected as young adults until their behavior indicates otherwise.
- Cell phones are to be used only for emergency situations or for necessary contacts while on the event by adults only unless otherwise stated.
- It is appropriate to use earbuds on buses only, otherwise any ear pieces that separate chaperones and teens from their surroundings should not be used.
- Difficulty with a teen an unhappy teen, should be reported to the VMY leaders as soon as possible.
- Engage the teens in putting away food and games, picking up trash, straightening up the main meeting area after meals and before retiring each night.
- Be available and helpful when supplies or materials need to be distributed, carried, and/or packed.
- If there are name tags, you and your teens must wear them at all times with the exception of being in a public setting.
- **NO TOLERANCE for teens and adults:** alcohol, drugs, weapons of any kind, knives, firearms, any form of intimacy, vulgar language, young men and women alone, leaving the larger group without permission, or entering sleeping quarters of the opposite sex. Please inform the leader of the event if you see or become aware of any of the above. If this is not adhered to, participants of any age may be sent home or not allowed to join future events.

For overnight events:

- Be sure your teens are in their sleeping quarters at the designated time for lights out.
- Inform your teens, they are responsible for waking themselves and those around them.
- Watch for your teens in the meeting area in the morning. If necessary, send someone to wake them.

CHAPERONE'S COMPLIANCE AND SIGNATURE FORM

I, _____, am in full compliance with the Protecting God's Children in my home diocese. I have read the CHAPERONE RESPONSIBILITIES AND GUIDELINES FORM and I am looking forward to participating in this event as a chaperone.

Chaperone's Signature _____

Event Name: _____ **Current Year** _____

PLEASE RETURN THIS PAGE.