

Back to Heartland ~ Youth Elect Service Weekend (Y.E.S.)

"What so ever you do to the least of my brothers & sisters...that you do unto me."

"DIVE"

Date: June 26, 27, 28, 2009 (We will meet at St. Francis on Friday, June 26 at 7:00 p.m.) (T-shirt will not be guaranteed unless application is received **on or before June 1.**)

Place: St. Francis Xavier Catholic Church (25 W Perry St., Willard - St. Francis will be our home for the weekend.)

Who: Incoming Freshman - Outgoing Seniors (I understand that if I am post high school I am considered team and will be expected to be a team member which might mean being called on to lead groups, be a role model, logistics, etc.)

Bring: Casual clothes and old clothes (You could get painted!!!) tennis shoes, sleeping bag, pillow, toiletries, towels, nice clothes for Mass, swim suit (for showers), snacks to share.

Skills: Cooperative Spirit, willingness to share talents and to serve.

Time Commitment: You must be able to participate for the entire weekend.

Cost: \$15.00 per person (Please make checks payable to YES)

If you have parish youth participating in the weekend you must have an Adult Parish Representative present.

- ☺ We will have the opportunity to help & serve others.
- ☺ We will clean, paint, and do repairs.
- ☺ We will make new friendships.
- ☺ We will renew old friendships.
- ☺ We will pray.
- ☺ We will play.
- ☺ We will walk in the steps of Jesus.

This Y.E.S. is limited to the first 50 applicants.

Please return: YES application, Conduct agreement, Medical form and \$15.00 As Soon As Possible and no later than **June 1** to: **St. Peter's Catholic Church, Attn. Sheila Hershiser-YES, 104 W First St. Mansfield, OH 44902** Make checks payable to YES.

(T-shirt can't be guaranteed unless registration is received by June 1).

Back to Heartland - Y.E.S. Conduct Agreement

(To be signed and returned with your application & medical release form)

Please return: YES application, Conduct agreement, Medical form and \$15.00 As Soon As Possible and no later than June 1 to: **St. Peter's Catholic Church, Attn. Sheila Hershiser-YES, 104 W First St. Mansfield, OH 44902 Make checks payable to YES.** (T-shirt can't be guaranteed unless registration is received by June 1)

Because this weekend of Youth Elect Service is really that -- service to others -- it is necessary that everyone understand that it will not be party time, goof-off time, etc. It WILL be a weekend of hard work, great fun, real friendship, growth, experiencing God's love, and really knowing the feeling of having done a great thing very well. As Mother Teresa said, "Doing small deeds with great love." It is absolutely necessary for all of us to observe a level of conduct and behavior so that everyone involved can have a great experience. Following are a few points you must agree to.

1. I will observe all rules of safety at the work sites and will work to keep everyone else safe, too.
2. I will get to bed on time so that I can get up early for work the next day and be the best I can be.
3. I will be prompt for all work, meals, prayers, and activities.
4. I will cooperate with all my fellow volunteers and do my part in making the load easier for everyone else.
5. I will cheerfully accept the conditions of work, food and living quarters. (Knowing full well that it will not have the luxury of my home.)
6. I will not bring any contraband material or purchase them while here serving at the YES (e.g. alcohol, drugs, improper reading, improper listening material, etc.) We reserve the right to inspect luggage.
7. I will be a good example for the people whose homes I will be working and I will treat them all with the up-most respect.
8. I will stay with my group and will not leave the grounds or property without the explicit permission of one of the adult leaders.
9. I will not form cliques within the group or spend time on romance. (I understand that is not the purpose of the weekend.)
10. I will follow directions of the adult leaders, whatever the case and will treat them with the up-most respect.
11. I will use common sense at all times and if I don't understand something I will ask the adults in charge for clarification.
12. I will participate in the entire weekend.
13. I understand that if I am post high school I am considered team and will be expected to be a team member which might mean being called on to lead groups, be a role model, logistics, etc.
14. I will only be in the sleeping space to change clothes and to sleep. (One of the purposes of the weekend is to meet new people and I understand I can't do that in the sleeping space.)
15. I will not be in the sleeping space of the opposite sex.

I/Parent/Guardian understand that if I/my child chooses to break this code of conduct that parents will be called to pick me/my child up no matter what time of day it is. I understand the importance of this conduct for the success of this YES and I am willing to live by it.

(Participant Signature)

(Parent/Guardian Signature)

Information Release

I understand that by my child's participation in Parish and Diocesan youth activities his/her picture could be taken and used in press releases, brochures, video, CD/DVDs, websites, etc. for publicity use only. This authorization will remain in effect forever. I understand that I have the right to revoke this authorization at anytime by submitting a written request. This agreement does not obligate the use of your child's picture. If participant is under 18 year old, this must be signed by parent or guardian.

I grant permission

I do NOT grant permission

(Participant Signature)

(Parent/Guardian Signature)

Date: _____

Medical Form

The law requires that parental permission be obtained for operative and medical procedures on minors. Please fill out the following consent form so that emergency procedures may be promptly carried out. Those in charge will make every effort to notify you if your child is hurt. Also, no operation other than minor surgery will be performed, except in an extreme emergency, without parents being contacted and fully informed.

Child's Name: _____

I give my permission for operative and medical procedures as may be deemed necessary for my son or daughter _____ Date: _____

(Parent or guardian)

Mother's Day Phone: _____ Evening: _____

Father's Day Phone: _____ Evening: _____

Is the above covered by hospitalization insurance? Yes No

Is so, what is the name of the company? _____

Policy number: _____ Group number: _____

Individual number: _____

Yes you can give my child Tylenol --- Dose: 1 tablet or 2 tablets -- 250 mg or 500 mg (please circle)

Please list facts concerning the child's medical history, including allergies and medications being taken, and any physical impairments to which a physician should be alerted.

Preferred Physician: _____ Phone: () _____

Address: _____

Preferred Dentist: _____ Phone: () _____

Address: _____

Year of child's last tetanus shot: _____

Anything else we should know about your child:

This must be filled out to participate in the YES.

Please return: YES application, Conduct agreement, Medical form and \$15.00 As Soon As Possible and no later than **June 1** to: **St. Peter's Catholic Church, Attn. Sheila Hershiser-YES, 104 W First St. Mansfield, OH 44902 Make checks payable to YES.**

(T-shirt can't be guaranteed unless registration is received by June 1)

Application (Please write neatly)

Name: _____ Phone: () _____

Address: _____

City: _____ State: _____ Zip: _____

School now attending: _____

Graduation year: _____ Age: _____

Parish: _____ Birth date: ____/____/____

E-mail: _____

T-Shirt Size: Adult (Circle one) S M L XL XXL

Male Female

Please answer every question by checking the item that best describes how you feel.

1. Do you think you will be able to appreciate the opportunity to live and work in a Christian community, and to learn more about yourself and the needs of the people we serve by taking part in this program? YES MAYBE NO

2. Are you willing to deal with the inconveniences in your living and working conditions for the sake of those you are serving and living with? YES MAYBE NO

3. Have you ever worked in a volunteer program(s) before? YES NO
If yes please describe what you did.

4. Are you willing to live and work in a close community, sharing the extra tasks for the benefit of the whole group even after a day of work? YES MAYBE NO

5. Do you have your parent's approval for working on this YES? YES NO

6. Are you currently under the care of a doctor? YES NO
If so what condition and how would this affect your working as a volunteer?

7. Do you have any special diet needs?

If so, what kind of diet and how can we provide for your needs? YES NO

You must be able to participate in the entire weekend. If you have parish youth participating in the weekend you must have an Adult Parish Representative present.

This must be filled out to participate in the YES.

Please return: YES application, Conduct agreement, Medical form and \$15.00 As Soon As Possible and no later than **June 1** to: **St. Peter's Catholic Church, Attn. Sheila Hershiser-YES, 104 W First St. Mansfield, OH 44902 Make checks payable to Y.E.S.**

(T-shirt can't be guaranteed unless registration is received by June 1)