

Adoremus TE

October 17, 2010 2:00pm-8:00pm

GROUP REGISTRATION INFORMATION

Registration:

- Only registered individuals in 7th-12th Grade, groups of parish youth groups, and school groups will be permitted to participate in Adoremus TE.
- **COST- \$20 PER PERSON**
(DO NOT MAIL PAYMENT AND FORMS AFTER OCT. 8. BRING TO THE EVENT)
 - 1 Free registration with every 10 registrations

Chaperones:

- All high school students must be accompanied by a chaperone.
- A minimum of two chaperones are required for a group of up to ten (10) students. One adult chaperone is needed per additional ten (10) youth.
 - Individual participants will be assigned a chaperone the day of the event.
- Please call 215-965-4625 if you have questions or concerns about chaperones.

Forms: (available at www.oyya.org and www.malvernretreat.com)

- Mail completed Registration Form with payment by October 8, 2010.
- A completed [Chaperone Information Sheet](#) must be presented at the registration table the day of the event.
- Two copies of each [Youth Permission Form](#) must be brought to the event – one must be in the possession of the chaperone; the other is to be handed in at registration table the day of the event.
 - Individual participants must mail their permission form with their registration form.

Food:

- Dinner will be provided along with light snacks and water throughout the day. We encourage participants to eat lunch prior to the event or to bring a lunch to eat during registration (2 PM – 3PM).

Priests Needed:

- Priests are needed for Reconciliation from 2:00 PM until 4:00 PM. Priests are also invited to concelebrate the Mass with Bishop McIntyre at 4:30 PM. If a priest from your parish is available please include his contact information on the registration form.
- Deacons are also invited to attend.

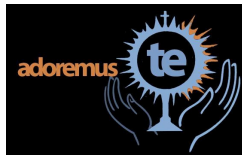
Location of Activities:

- If weather permits, all activities except for Mass & Dinner will be held outdoors. Please dress appropriately. Activities will be moved indoors in the case of inclement weather.

Financial Assistance & Questions:

- Please do not let cost be a deterrent from registering for Adoremus Te. Contact Abbie Langsdorf at alangsd@adphila.org or 215-965-4625 if you have any other questions to discuss opportunities for financial assistance with the registration.





Adoremus TE
October 17, 2010
SCHOOL/YOUTH GROUP
Registration Form

Parish/School: _____ City: _____

Group Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Work Phone: _____ Home/Cell Phone: _____

E-mail: _____

Diocese: _____

- Two chaperones **MUST** accompany High School student groups of ten or less. One additional chaperone must accompany up to 10 additional students. Call OYYA at 215-965-4625 with chaperone questions.
- Chaperones need to bring 2 copies of the student permission forms to the event. One will be handed in at the registration desk, the chaperone will hold the other copy.

Students _____ # Chaperones _____ Total # attending _____
 (7th through 12 graders only)

Standard Registrations @ \$20 each Total No. _____ x \$20 = \$ _____
 No. Free _____ (1 with every 10 pd.)

Method of Payment: _____ Cash _____ Check _____ Visa/MC
 Credit Card # _____ Expiration Date _____
 Name on Card _____

Make check payable to "**Malvern Retreat House**"

Please Note: Payment reserves your place at Adoremus TE . Registration fee is non-refundable unless event is sold out.

We invite all priests to attend Adoremus Te and request their assistance for Reconciliation from 2:00 PM to 4:00 PM.

- Will a priest be accompanying your group? _____ Yes _____ No
 Will he be available for Reconciliation? _____ Yes _____ No
 Will he be concelebrating at Mass? _____ Yes _____ No

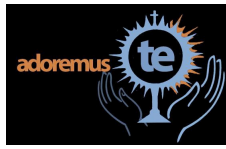
Name of priest and or Deacon _____

(Please Print)

Return this form with payment by **October 8, 2010** to:
 Malvern Retreat House
 ATTN: Adoremus TE
 P.O. Box 315, Malvern, PA 19355-0315



***After October 8th, bring forms and payment to the event.**



**Adoremus TE
October 17, 2010
Chaperone Information Form**

(PLEASE DUPLICATE THIS FORM AS MANY TIMES AS NEEDED!)

Parish/School: _____ **Total # of Students:** _____

Initial Two Chaperones: _____ **Cell Phone:** _____

_____ **Cell Phone:** _____

Please list all of your chaperones on this form. No students may participate in the day without two adult chaperones. **A minimum of two chaperones are required for a group of up to ten (10) students. One adult chaperone is needed per additional ten (10) youth.** Call OYYA at 215-965-4625 with chaperone questions.

This form MUST be submitted at the registration desk at Adoremus Te on October 17, 2010.

List All Additional Chaperones here:

Name:	Cell Phone:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

****During Adoremus TE, the chaperones listed above will be responsible for the students they accompany. All chaperones should carry their cell phones in a vibrate mode.****

Statement of Compliance

As group leader, I have received a completed and signed "Adoremus TE Permission Form" from each participant in the group. Furthermore, I verify that every adult chaperone in my group is in full compliance with the diocese's policies on child protection, including the successful completion of a Pennsylvania criminal background check and child abuse clearance in the last 5 years and participation in the Archdiocesan Child Sexual Abuse Prevention training. I fully understand the meaning of this statement and sign this Chaperone Form knowingly, freely and willingly.

Signature of Group Leader: _____ Date: _____



Adoremus TE PARENTAL PERMISSION FORM

This form **must be completed by each participant** and his/her parent(s) or guardian(s). It must then be submitted prior to the event to the parish/school adult chaperone that will be accompanying the students to the event. The original form must be in the possession of the chaperone/s for the duration of the event. A copy of each permission form must be submitted at the event's registration table. **No one will be permitted to participate in Adoremus TE without submitting this form at registration.***

I grant my permission for my son/daughter, _____, to participate in Adoremus TE on Sunday, October 17, 2010 at the Malvern Retreat House. Registration begins at 2:00 PM and the day ends around 8:00 PM.. Activities for the day will include: Lawn sports/games, Praise and Worship Music, Keynote Speaker, Mass, Dinner and Eucharistic Adoration. If weather permits, most of the activities will be held outside. No one is permitted to leave early without permission from a parent/guardian.

Name of Attendee: _____

Address: _____
(Street) (City) (State) (Zip)

PARISH/SCHOOL: _____

GRADE: _____ EMAIL: _____

If I cannot be reached in the event of an emergency, the following person is authorized to act on my behalf:

Name: _____

Address: _____

Phone: _____ Cell: _____

Relation to participant: _____

Child's physician's name: _____

Phone number: _____

Health Insurance Type: _____

Policy Number: _____

List any conditions, e.g. allergies, or other medical problems which should be called to the attention of chaperones:

Knowing that there will be proper supervision, in case of injury, I will not hold the Office for Youth and Young Adults of the Archdiocese of Philadelphia or any person or persons connected with them liable. My signature below also gives OYYA permission to use pictures from the day in which my child may appear for promotional materials.

CODE OF BEHAVIOR

1. Participants must stay and participate in the entire event. Participants may not leave the premises unless accompanied by an adult leader, parent or legal guardian.
2. The possession or use of alcohol, tobacco, drugs, or weapons of any kind is not permitted.
3. Foul language is not tolerated.
4. Participants agree to dress appropriately. This prohibits short shorts, tank tops, any clothing with writing on the back-side, that exposes midriff or undergarments, or that has any reference to profanity or tobacco or alcohol.
5. Participants must heed any and all directions of activity staff.
6. Participants must respect the rights and property of others. Damage to or defacing of property will be the financial responsibility of the participants involved and the participant's parents/legal guardians.
7. Failure to abide by this Code of Behavior may result in a request to parents/legal guardians, to transport offending participants from the premises, and the parents/legal guardians shall immediately comply with the request.

Parent/Guardian Name: _____
(Please print clearly.)

Telephone: _____

SIGNED: _____
(Parent or Guardian)

Cell Phone: _____

Please return completed form to the adult registering your child for Adoremus TE

*Individual Participants mail this form with Registration Form and payment.

