

NATIONAL YOUTH EVENT

RI CONFERENCE, UNITED CHURCH OF CHRIST
SERVICE TRIP: JULY 7-14, 2012 / EXPRESS TRIP: JULY 9-14

SEND COMPLETED FORMS TO:

CENTRAL CONGREGATIONAL CHURCH
ATTN: REV. KAT TOWNES
296 ANGELL ST
PROVIDENCE, RI 02906

REGISTRATION DEADLINE

3/1/12

FULL NAME: _____

PARENT OR GUARDIAN NAME(S) (IF UNDER 18): _____

**EMAIL ADDRESS(ES) WHERE YOU'D LIKE ALL CORRESPONDENCES SENT REGARDING
REGISTRATION, BILLING, EVENT INFORMATION AND TRIP UPDATES (MUST INCLUDE AT
LEAST ONE PARENT OR GUARDIAN'S EMAIL ADDRESS):**

MAILING ADDRESS:

Address: _____

City: _____ ST: _____ Zip: _____

REGISTRATION TYPE: YOUTH ADULT ADVISOR

HOME PHONE: _____ **OTHER PHONE:** _____

EMERGENCY CONTACT: _____ **PHONE:** _____

HOME CHURCH: _____

AGE _____ **BIRTHDAY** _____ **GENDER:** Female Male Other _____

DO YOU HAVE SPECIAL DIETARY NEEDS?: YES NO (ie: vegetarian, food allergies, etc.)

DIETARY RESTRICTIONS: _____

SPECIAL NEEDS (ADA):

Do You Require Aids or Services? YES NO

Special Needs: _____

T- SHIRT SIZE: ADULT SMALL ADULT MEDIUM ADULT LARGE ADULT XL
ADULT XXL ADULT XXXL

HOUSING (check one):

I AM A YOUTH AND WOULD LIKE TO BE IN A ROOM WITH _____

(NOTE: There are two beds per room, you must request the same person that is requesting you. All youth will be in a double room unless you have a special need that requires you to have a single room. RICUCC Rooms will be near chaperone rooms. No adult/youth housing arrangements will be allowed.)

I AM A YOUTH AND WOULD LIKE TO BE ASSIGNED A ROOMMATE

I AM A YOUTH WITH SPECIAL NEEDS AND WANT TO REQUEST A SINGLE ROOM
PLEASE LIST SPECIAL NEED _____

I AM AN ADULT AND WOULD LIKE TO BE IN A ROOM WITH _____

I AM AN ADULT AND WOULD LIKE TO BE ASSIGNED AN ADULT ROOMMATE

I AM AN ADULT AND WOULD LIKE TO REQUEST A SINGLE ROOM

TRIP LENGTH (CHECK ONE):

I WOULD LIKE TO PARTICIPATE IN THE SERVICE TRIP, JULY 7-14.

I WOULD LIKE TO PARTICIPATE IN THE EXPRESS TRIP, JULY 9-14.

SIGNATURE:

By signing below, I am expressing my desire to be part of the delegation from the Rhode Island Conference of the United Church of Christ to the National Youth Event. The initial cost estimate for this trip is \$625 for the Service Trip, or \$605 for the Express trip. These estimates are subject to change based on fundraising at the local and Conference level. This fee covers your bus transportation to and from National Youth Event in West Lafayette, Indiana, room (double occupancy, single add \$75) and board at the event, all normally included activities at the event (worship, workshops, and plenary sessions), and service trip housing, meals and trip coordination if that option is chosen. These fees do not include tip for bus drivers, snacks and souvenirs during event and optional activities that maybe offered.

Additionally, I have reviewed the forms and policies found at: <http://www.ucc.org/youth/nye/the-basics/nye-forms-and-policies.html>. If you are an adult, please fill out and include a copy of the adult covenant, medical release, the safe church self-disclosure questionnaire, and the media release form. If you are a youth, please fill out and include a copy of the youth covenant, media release, and media release form.

I am including a \$100 non-refundable deposit to reserve my spot in the RICUCC delegation to NYE! (required for registration)

I am including my Medical Release Form and Covenant Forms (required for all participants)

I am an adult, and I acknowledge that I have read the Safe Church Policy Concerning Abuse Prevention and am including my Safe Church Self-Disclosure Questionnaire. (required for all adult participants)

Signature of Participant _____

Signature of Parent or Guardian (if participant is under 18) _____