

Chrysalis 2009: December 4 - 6, 2009

Metro DC Synod Youth Ministry Event Registration Form – Adult

Name _____ Female ___ Male ___ T-shirt size _____

Address _____

Phone (Home) _____ (Work or Cell) _____ Email _____

Home Congregation _____ YM Position _____
Name City/Town State

Background Check Forms submitted to Metro DC Synod office: Date _____

Special Needs: (Language, accessibility, food, etc.) _____

Consent Form

In the event that I cannot give authorization in person, I hereby give authorization to the staff of Chrysalis '09 to seek emergency medical treatment for me. This authorization is valid for the period December 4-6, 2009.

I also grant the Synod & ELCA unrestricted rights to use, alter, and reproduce any images (still and video) from the event, in any medium without compensation.

Medical Insurance Carrier _____

Company _____

Policy Number _____

Name of Subscriber _____

Signature _____

Participant Expectations – Adults

This Metro DC Synod event is an intentional Christian community. In such a community the behavior of all participants reflects the faith we share in Jesus Christ our Lord. This covenant is a promise you make with the community.

Therefore, it is expected that

1. For reasons of continuity and group-building, all participants are needed for the entire event. Therefore, arriving late / leaving early are strongly discouraged and must be discussed with Event staff ahead of time.
2. For reasons of safety and accountability, participants will remain throughout the event. If, due to an emergency, leaving becomes necessary, Event Coordinator must be advised before leaving the site.
3. All registrants - both youth and adults - will participate fully in all activities at the event.
4. Respecting the need for quiet rest, participants are expected to return to their rooms following the end of the evening's activities and remain in their rooms and quiet at lights out.
5. Participants are expected to respect the property of others and of the event site, to clean up after themselves, and if responsible for loss or damage, to pay for it.
6. Absolutely no alcohol, weapons, tobacco, or drugs (other than prescribed medication) will be brought to or used at the event.
7. iPods, electronic games, CD players, etc. will not be brought to the event; cell phones will be used by adults for emergencies only.
8. Lutherans throughout Metro DC will be proud of the way in which our community represented them.

By my signature, I agree to abide by, support and help enforce these expectations and I acknowledge that I am primarily responsible for the conscientious participation of the youth I accompany, their regard for others through the acceptance of guidelines established for the event, including curfew, and their physical well-being.

Signature _____

I am willing to serve at this event as a _____ Small Group Facilitator (___ Alone or ___ As a Co-leader)
 _____ Guardian Angel _____ First Aider / EMT / Nurse (circle which)
 _____ Other: _____