



2010 YOUTH RALLY CAMPER APPLICATION
XAVIER UNIVERSITY, CINCINNATI, OHIO
Monday, July 12 through Saturday, July 17
For Youths 11 – 17 years of age

YRC Application Part 3 • Youth Rally Consents

This set of pages is for you and your son or daughter to complete. There is no option to submit this electronically. It is only in the form of a PDF document to be printed out, completed, signed, and mailed to:

Youth Rally Committee, Inc.
c/o Linda Aukett
424 Bradford Ave.
Westmont, NJ 08108

The pages are as follows:

Section 3a • Youth Rally Camper Form (2 pages)

- first page for camper to complete
- second page (Code of Conduct) for camper and parent to sign

Section 3b • Supplemental Forms (2 pages)

- CONSENT for participation
- WAIVER of liability:
- Swim Permission
- CONSENT to Treat

ATTACHMENTS to include when you send in the application:

1. Part 1 (the “Intent”) if you have not already sent that in.
2. Part 2 to describe the camper’s health situation or medications (if not sent already)
3. A recent photo of your daughter or son (see inset box).
4. **VITAL**: please copy both sides of your teen’s health insurance ID card and attach it with this section.

If you need sponsorship assistance, we hope that you checked the appropriate box on Part 1 and completed Part 5. If you didn’t do that, please [click here](#) or contact us via info@rally4youth.org .

We look forward to seeing your camper in July!



Part 3a • Youth Rally Camper Form (#1 of 2 pages)

To be completed by the teen who will be attending the rally

Are you able to manage your own personal needs?

What would you like to learn at the Youth Rally?

Please tell us 3 things about yourself.

1.

2.

3.

If you have attended the Rally in the past, please tell us about your best experience while there.

Applicant Signature _____

Part 3a • Youth Rally Camper Form (Cont. - #2 of 2 pages)

Code of Conduct

- ❖ Treat all other campers and all staff with respect
- ❖ In-room curfew 11 PM
- ❖ Lights out at midnight
- ❖ No loud music
- ❖ iPod or other personal entertainment device use only outside of scheduled session times
- ❖ Cell-phone use only outside of scheduled session times
- ❖ No campers allowed in rooms or halls of the opposite sex
- ❖ No tobacco, alcohol or illegal drug possession or use
- ❖ No weapons
- ❖ No vandalism
- ❖ No disorderly conduct
- ❖ Sexual harassment will not be tolerated
- ❖ Daily bath or shower must be taken
- ❖ Dorm rooms, common areas and bathrooms are to be kept tidy (used pouches are to be properly disposed in Ziploc® or similar sealable bags)
- ❖ Attend ALL scheduled meals on time
- ❖ Attend ALL scheduled meetings and activities on time
- ❖ Stay at ALL scheduled activities until COMPLETION of activity
- ❖ Campers are NOT allowed to leave the campus unless the Rally Chair gives permission and two Youth Rally staff accompany the camper
- ❖ No inline skates, skateboards or scooters
- ❖ No pizza may be ordered after 10 PM
- ❖ No changing of room assignments

I have read and **will adhere** to the Youth Rally Code of Conduct at all times. I understand that if I break the Code of Conduct I will immediately be sent home at my parents' expense.

Camper's Signature

I have read and understand my child must adhere to the Youth Rally Code of Conduct. If my child does not abide by the rules of the rally, **I understand that she/he may be sent home at my expense.**

Parent's Signature

Part 3b • Supplemental Forms (#1 of 2 pages)
Youth Rally Consent, Waiver of Liability and Swim Permission

CONSENT for participation:

I hereby give consent for my child, _____ to attend the Youth Rally. I understand that acceptance is contingent upon recommendations of my child's physician and the Youth Rally Committee. I give permission for my child to participate in all activities, including sports such as softball, volleyball and swimming, unless contraindicated by my child's physician. I also give permission for my child to participate in activities that may require transportation in a moving vehicle, knowing that the driver will be 21 years or older and duly licensed to drive. I also consent to pictures being taken of my child for use in publicity if the opportunity arises. I understand that I will be called in the event of a major illness or injury. I understand that emergency medical treatment may have to be provided and agree that the rally chairperson may authorize said treatment, in the event it is needed. If my child does not abide by the rules of the rally, I understand that she/he will be sent home at my expense.

Signed this _____ day of _____

Signature of Parent or Guardian

Relationship

Signature of Parent or Guardian

Relationship

WAIVER of liability:

CHILD 'S NAME _____ STATE OF RESIDENCE _____

I hereby waive all claims against the Youth Rally Committee, Inc. (YRC) and camp sponsors, personnel and volunteers for any injury that my child might suffer at the Youth Rally. I certify that I am the parent(s)/legal guardian(s) for said child and that I am the legal custodian of the child and have the authority to execute this waiver.

Signed this _____ day of _____

Signature of Parent or Guardian

Signature of Parent or Guardian

SWIM PERMISSION:

CHILD 'S NAME _____

I hereby give my child permission to swim while at the YRC Youth Rally Camp. I understand that there will be adult supervision during all water activities.

My child does not swim

My child is a beginning swimmer

My child swims well

Signed this _____ day of _____

Signature of Parent or Guardian

Signature of Parent or Guardian

Supplemental Forms • Part 3b (Cont. - #2 of 2 pages)

Youth Rally Consent to Treat

Camper's Name _____ Date of Birth _____ Gender: _____

To the best of my knowledge, the attached health history is correct and the person described has permission to engage in all camp activities except as noted by me and/or the examining physician.

I authorize the Youth Rally Medical Chairperson or designated person to seek medical attention as necessary for my child, _____, in the event of illness or injury while attending the Youth Rally. This may be done at a physician's office or medical facility of choice. I also give permission to the physician selected by the Rally chairperson or designee to render any necessary medical care to my son/daughter as named above. I also give permission for the Youth Rally staff to care for this child in accordance with the doctor's orders.

I understand that in the event of serious injury or illness I will be notified as soon as possible. If I cannot be notified in the event of a medical or surgical emergency, I give permission for my child to be taken to the hospital and treated by the hospital physician(s). If my child is hospitalized during the course of the Rally and is still hospitalized when the Rally ends, I understand it is my responsibility to arrange for transportation home. The Rally Chairperson or staff will not stay past Rally's conclusion to supervise care or transportation needs.

Signature of Parent or Guardian _____ date _____

Signature of Parent or Guardian _____ date _____

Address _____ City _____ State _____ Zip _____

Phone: Home _____ Work: _____ Emergency: _____

Health Insurance Company: _____ Policy#: _____

Public Assistance (example: Medicaid) ID #: _____

MANDATORY – Include copy of both sides of insurance identification card and return with application form.

Physician's Name: _____

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

Phone: _____ Emergency: _____

Due no later than June 1, 2010

Please mail the completed **Rally Application** as soon as possible, as space may be limited.

Mail to:
Youth Rally Committee, Inc.
Linda Aukett, Secretary
424 Bradford Avenue
Westmont, NJ 08108

If not mailing, other delivery options:
Scan & email to laukett@rally4youth.org
OR Fax: 856-854-5637 (afternoon or evening)

Questions? Call 856-854-3737 (collect OK)