



Youth Convocation Delegate Application

For representation of Youth within their Convocation

- Serving as a Youth Convocation Delegate during the Diocesan Annual Convention is a privilege granted to confirmed communicants between the ages of sixteen and eighteen in good standing of a parish or mission of this Diocese.
- All Applications must be postmarked to Youth Department by May 1. The Youth Office will forward all applications to the Convocational Deans. Convocations make the selection for their Youth Convocation Delegate and Alternate, not the Diocesan Youth Staff.
- Once the selection of Youth Convocational Delegates and Alternates are selected they will report to and are supervised by the Diocesan Youth Missioner (DYM).
- **All Youth Delegates & Alternates are required to participate in a conference call in September with the DYM prior to Convention. Delegates & Alternates are also required to arrive Thursday evening and stay at the hotel with the youth delegation through the closing of Convention on Saturday.**
- All Youth Convocational Delegates & Alternates will be expected to dress in appropriate attire (suit, dress pants, shirt and tie, a reasonable length skirt or dress).
- Youth Convocational Delegates are expected to abide by the Community Covenant and represent themselves, their church and convocation in a dignified manner. **(Violations of this Covenant will be addressed by our Youth Covenant Committee.)**

Youth Delegate cost is \$100

(The total cost of Convention is \$320. The Diocesan Youth Budget and Youth Scholarship Fund will cover the rest.) This cost includes registration, hotel & meals.

Applications are due by and no later than May 1.

Payments are due by and no later than September 30.

**Youth Alternates will also be selected.
They must meet the same criteria as the Youth Convocational Delegates.**

PARTICIPANT'S NAME _____

TO WHOM IT MAY CONCERN:

The undersigned do(es) hereby give permission for our (my) child(ren): the above stated "Participant" to attend and participate in **YOUTH MINISTRY EVENTS** sponsored by the Episcopal Diocese of North Carolina in 2019.

LIABILITY RELEASE: In consideration of The Episcopal Diocese of North Carolina allowing the Participant to participate in youth ministry activities, we (I), the undersigned, do hereby release, forever discharge and agree to hold harmless The Episcopal Diocese of North Carolina, its employees, volunteers and agents (collectively herein the "Diocese") from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the Participant while involved in the youth activities. We (I) the parent (s) or legal guardian (s) of this Participant hereby grant our (my) permission for the Participant to participate fully in youth ministry activities.

Furthermore, we (I) [and on behalf of our (my) Participant(s)] hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein.

Further, authorization and permission is hereby given to said Diocese to furnish any necessary transportation (within the limitations of Diocesan insurance and the law), food and lodging for this Participant. The undersigned further hereby agree to hold harmless and indemnify said Diocese for any liability sustained by said Diocese as the result of the negligent, willful or intentional acts of said Participant, including expenses incurred attendant thereto.

Medical Treatment Permission: We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agree (s) to pay all cost and expenses incurred in connection with such medical and dental services rendered to the afore mentioned youth pursuant to this authorization.

Furthermore, we (I) give permission for an adult supervisor to administer any over-the-counter medication, as specified on the Participant's medical form, my child may need during this event.

Early Return Home Policy: Should it be necessary for our (my) youth to return home due to medical reason, disciplinary action or otherwise, the undersigned shall assume all transportation costs and responsibility.

Photo & Video Release Permission: The undersigned understands that promotional pictures (individual and group) have been / will be taken during these events. I give permission for my child's picture/video to be used for promotional materials (newsletter, web page, promotional signs, etc.) in highlighting the event. **NAMES WILL NOT BE USED.**

Transportation Permission: The undersigned does also hereby give permission for our (my) youth to ride in any vehicle driven by and approved ADULT chaperone while attending and participating in activities sponsored by the Diocese. My youth and I understand that **SEAT BELTS SHALL BE WORN AT ALL TIMES** during transportation.

We (I) the undersigned also, acknowledge that I have reviewed details regarding the event our (my) child is participating in.

Parent(s)/ Guardian(s) Signature(s) _____ Date _____

**Youth Convocational Delegate Nominee For Diocesan Annual Convention
Episcopal Diocese of North Carolina**

- ❖ Youth must be between the ages of 16-18 years old, (currently in high school), **Confirmed and an active member of your church.**
- ❖ Please complete and return form to **Diocesan Youth Department**
200 W. Morgan St. Suite 300, Raleigh, NC 27601.

Nominating Parish	City	Convocation		
Nominee's Name	Address			
Email	Nominee's Cell#	Age	Grade	Female / Male
Notable Characteristics /Qualities:				
1.				
2.				
3.				
Activities / High School Extracurricular:				
1.				
2.				
3.				
Church Activities and Involvement:				
1.				
2.				
3.				
Diocesan Activities and Involvement:				
1.				
2.				
3.				
Community / World Service and Involvement:				
1.				
2.				
3.				
Interest:				
1.				
2.				
3.				

Why do you want to serve as a Youth Convocation Delegate?

ACOMMUNITY CONVENANT/EXPECTATIONS:

All Youth Delegates & Alternates are required to participate in a conference call with the DYM prior to Convention. Delegates & Alternates are also required to arrive Thursday evening no latter than 7:00p.m and stay at the hotel with the youth delegation and will not depart until convention has been adjourned on Saturday.

Respect all participants at Convention, the property of the Hotel & Convention Center. Your behavior reflects on you and on the group. We are accountable to each other. Behavior disruptive or harmful to the community or property will not be tolerated.

Youth Convocational Delegates & Alternates will be present and on time for all planned activities. All Delegates & Alternates are expected to remain at Convention from Thursday evening to Saturday afternoon.

Each person is expected to abide by the curfew, quiet times and physicals boundaries.

Because of insurance liability, youth are not permitted to leave the event without authorized adult supervision. Any advisor or youth wishing to leave should do so only with the consent of the Diocesan Youth Missioner.

Parents need to complete the medical release form. In the event of a change, it is imperative that updated numbers and other relevant information be given to the Diocesan Youth Missioner upon arrival.

Violation of this covenant is a violation of the community. All violations will be dealt with appropriately by members of the community. Possible consequences may include notification of the violator's parents/rectors, and the violator may be asked to leave Convention.

Serving as a Youth Convocational Delegate (or) Alternate is a privilege and an honor. I understand that I have been asked to be a Christian leader...serving as an example to other people and taking the responsibility for my own spiritual growth by worshipping regularly, reading & studying scripture, praying, & being part of a Christian community.

Applicants Signature: _____ **Date:** _____

I recommend and confirm that the applicant meets Criteria to be a Youth Convocation Delegate for Convention.

Priest Signature: _____ **Email:** _____ **Date:** _____

Youth Leader: _____ **Email:** _____ **Date:** _____

Parents Signature: _____ **Email:** _____ **Cell#** _____

Episcopal Diocese of North Carolina

Youth Medical Information

Event: _____ **Date :** ____ / ____ / ____

Last Name, First Name (Name Goes by): _____

Sex Assigned at Birth/ Gender identity: _____

Home Address (City, State & Zip): _____

Parish Name, Parish City: _____

Email Address: _____

T-shirt Size: _____ Grade: _____ Date of Birthday: _____

Medical Information

Medications currently taking: _____

Medications Not To Be Given: _____

Allergies: _____

Medical Condition: _____

Dietary Needs: _____

Date of last Tetanus immunization: _____

Insurance Company: _____ Contact Person: _____

Insurance Contact # (000-000-0000) _____

Emergency Contact Information

Contact Name

Contact Phone/Cell

Contact Email Address