

REGISTRATION FORM

Each participant must complete a Registration Worksheet and send it with a completed Permission and Release Form and full payment to the address listed at the bottom of this page. You are NOT registered until both of these forms are turned in with your payment.

Check One: Youth _____ Adult Sponsor _____ Circle: Male Female
Home Church: _____ Church Phone: _____
T-shirt Size: _____ Trip Coordinator: _____
Name: _____ Grade (in 23/24): _____ Phone: _____
Trip Coordinator E-mail: _____

ADULT SPONSORS ONLY:

Special Skills: _____ (Nurse, paramedic...)

Willing to do a workshop (circle): Y N Topic: _____

Workshop target audience: Grade 8-10 Grade 11-Graduating All Youth Sponsors All

Registration Fee:

Early Registration \$380 Paid and postmarked no later than 3/15/23
Standard Registration: \$415 Paid and postmarked no later than 5/1/23
Late Registration: \$475 Paid after 5/1/23 (No guarantees on housing or activities)

White Water Rafting will not be offered through registration
All other Y sponsored activities such as rock climbing, zip line, horseback riding, etc.
should be handled directly with the YMCA

Total Amount Due: \$ _____

Checks Payable to "The AALC Youth Conference" unless otherwise noted by your youth group

Submit worksheet, release form and payments to your Youth Director / Youth Advisor. Pastor may want to see this before they are mailed in. Check with them as to how your group will handle registration and who you should make your check payable to, as they may submit one check for all registrations.

Youth Conference Registrar
c/o Pat & Scarlet Dean
2880 75th St NW
Glenburn, ND 58740

Participants must ensure that correct payments are submitted and post marked based upon dates listed. To register, you MUST send in the registration payment and registration form. No payment without registration forms/release forms. Payment must be postmarked by cutoff date to get early / standard registration savings.

FOR REGISTRAR USE ONLY

Date Registration Form Received: _____ Amount Paid: _____

PARENT/YOUTH COVENANT

Expectations for the participants - sponsors will be enforcing

The leadership of the 2023 AALC National Conference would like to remind you of a few basic guidelines we all need to follow in order to make this year's Conference enjoyable for all participants. These things are pretty standard for events such as this, so none of them should surprise you too much. If you keep in mind what the purpose of the Conference is, these things will not become an issue at all.

1. We are all ambassadors for Christ. Our attitudes and actions are a direct reflection on Him and His church. Keep this in mind when you decide what you will be wearing at the Conference (modesty is the key here), how you treat your surroundings (leave them cleaner than when you came), how you treat fellow Conference participants (just like you wish to be treated), and how you treat the sponsors and Conference leadership (with respect and obedience).

2. Be there. The Conference has been designed to have a lasting spiritual effect on your life. Know what time it is and where you are supposed to be!!! Students will be at all scheduled activities unless they have received permission from the Conference staff.

3. Health and Safety. Current health and safety guidelines of the YMCA, Estes Park and Colorado will be followed to ensure we can gather at the 2023 Youth Conference. Participants accept the risk of gathering.

4. Get some sleep. A good night's sleep is vital to getting the most out of the Conference. Be in your room and lights out at the time specified on your schedule. Remember to respect others – the walls are not sound-proof.

5. Take good care of yourself. Being at a high altitude has an effect on those who are not used to it. It's important that you eat three meals a day (even if you don't feel hungry), and drink plenty of fluids. Asthma and hyperglycemia effects are greatly increased in this setting.

6. Remember the Purple Rule. Girls are pink, guys are blue - Pink and blue together make purple... THOU SHALT NOT MAKE PURPLE! Couples should limit physical contact to hand holding. Remember, we are representing Christ!

6. Respect your free time privileges. (PRIVILEGE is the key word there...) Know what's going on, and where it's taking place. There will be plenty of things for you to choose from but keep a couple of things in mind...the other dorms and housing units are off limits to us at all times. Also, be back at the Camp in time for dinner. All off-site activities will conclude in time to allow you to make it back to eat. Don't wander off alone! Be with at least one other person and let your room sponsor know where you are going to be. There will be hikes scheduled during the course of the Conference. These will be the only times you should be on the trails. All trails are off limits at all other times.

7. Know what you can and cannot bring along. These are fairly simple, and self-explanatory...

Please do NOT bring: game consoles, drugs, alcohol, tobacco, synthetic marijuana, any drug or paraphernalia, bath salts, vaping of any kind or purchases of any of these, laser pointers, weapons of any kind (guns, knives, fireworks, flamethrowers, and nuclear warheads should be left home), inappropriate clothing & logos or expensive items you're afraid of losing (if you absolutely couldn't stand to lose something, you may want to think twice about bringing it along).

In situations where a participant's behavior does not follow these guidelines, every effort will be made to remedy the situation in accordance with Biblical principles. However, the leadership of The AALC National Youth Conference reserves the right to take disciplinary actions including youth being sent home at their parent's expense if deemed necessary.

YOUTH CONFERENCE PERMISSION & RELEASE FORM

You are NOT registered until this form has been turned in with your registration fee, postmarked by the registration date. Please fill out the following sheet and turn in with your registration worksheet and payment. Be sure all information is filled out and signed by parent(s) or legal guardian(s).

Participant Name: _____ **Date of Birth:** _____

Phone: _____

Address: _____ **City:** _____

State: _____ **Zip:** _____

I/We hereby give permission for my/our above-named child to participate with the youth of The AALC in any programs, activities, trips and events. I/We understand that these group outings will take place within the state of Colorado. I/We understand participation is voluntary and at our own risk.

I/We hereby release The American Association of Lutheran Churches, its staff and sponsors, and its participating churches from responsibility and liability for any activities. In the event of an emergency, I/we hereby authorize an adult leader of this activity to act as my/our agent, to consent to any x-ray(s); examinations; and hospital care advised and supervised by a physician, surgeon or dentist (as appropriate) licensed to practice under the laws of the state where the services are rendered. I/we expect to be contacted as soon as possible and I/we therefore take responsibility for providing multiple phone numbers where I/we may be reached in the event of an emergency.

I/We hereby grant permission to The AALC the right to use, reproduce, and/or distribute photos and video of my/our above-named child, for use in materials created for purposes of promoting the activities of The AALC.

I/We have read the above release, understand and agree with these statements. We also have read and agree to the expectations and what to and not to bring. I understand the youth commission will enforce these expectations, and if needed, my child (I) will be sent home at our (my parents) expense.

Signature: _____ **Date:** _____

Parent/Guardian Signature

_____ **Date:** _____

Student Signature

Emergency Contact Number(s):

Name: _____ **Number:** _____

Name: _____ **Number:** _____

Name: _____ **Number:** _____

MEDICAL INFORMATION

Blood Type (if known): _____ **Allergies:** _____

Current Medications: _____

Physical Handicaps / Limitations / Special Needs: _____

Medical Insurance Carrier: _____

Policy Number: _____ **Phone:** _____

Does Carrier require pre-approval for hospital admission? YES NO

Current Physician: _____ **Phone:** _____