

Dear Parents,

Your teen is eligible to participate in a parish-sponsored activity requiring transportation from the parish building. This activity will take place under the guidance and supervision of authorized personnel from St. Mary Queen of Angels and other area parishes. A brief description of the activity follows:

Description:

The **Mission: Flint Summer Work Camp** will provide an opportunity for the youth to serve in many ways the last week in July/August. *Areas of service include painting, assisting in nursing homes, cleaning up Flint neighborhoods, assisting in a community food and clothing bank, evangelizing, and much more. Any youth age 14 and over, young adults or adults can participate. ****Adult chaperones supervise each group.***

Workers will be staying overnight at St. Mary Queen of Angels (SMQA) in Swartz Creek. The parish will provide food, lodging, and through the University of Michigan-Flint Recreation Center and Powers Catholic High School, showers. The \$100 cost is required to provide food, transportation, evening entertainment, and donation to the Project. The workers will sleep at SMQA and will be required to bring sleeping bags (see attached list for more items). Checks should be made out to St. Mary Queen of Angels.

The evening entertainment includes: games, nightly praise & worship, morning Mass, Sacrament of Reconciliation, and small group time. Experience what faith can do when it works in love! Share the week with old friends and new ones as we respond to the call to love God and love your neighbor!

Location:

Host Parish – St. Mary Queen of Angels (4413 Morrish Rd. Swartz Creek, MI 48473 - 810.635.3240)

Date and time of event:

Begins Sunday July 30th, 4pm, ends Friday, August 4th, by noon.

Method of Transportation:

Once at SMQA, youth participants will be carpoled to and from their service locations as well as other destinations (UofM Flint or Powers Catholic High School for showers, and other locations per schedule). We will be hoping for parent assistance in transporting our teens from STA to SMQA.

Designated Supervisor of Activity:

Local Youth Minister: Annie Kitching (and/or designated chaperones)

Flint Mission Supervisor: *Jay Jong, 517-230-6210*

Deadline for registration:

Monday, July 18th to Annie.

For your child to participate in this event, please complete, sign, and return the following statement of consent and acknowledgment by **July 18th**. As parent or legal guardian, you remain responsible for any consequence, legal or otherwise, which may result from actions taken by the named student.

Work Week Schedule

Sunday:

4:00 PM	Arrival and Check In
5:00PM	Mass
6:30 PM	Dinner
7:15 PM	Program begins
9:00 PM	Praise and worship
10:30PM	Organize separate Guys and Girls Sleeping Arrangements
11:00PM	Lights Out

Monday - Thursday:

6:30 AM	Wake Up
7:30 AM	Morning Mass
8:00 AM	Breakfast
8:30 AM	Head to various areas of service. The work day is usually from 9-4PM with an hour lunch break Work groups will be divided up into multiple chaperoned work sites
4:00 PM	Once work site is completely cleaned up, group will head to UofM Flint Recreation Center or Powers for showering. Groups will have free time once they return to St. Mary's.
5:30 PM	We will return to St. Mary's for dinner
7-10 PM	Evening Fellowship and Worship Videos, Games, Small Group Time, Praise & Worship, Speakers, Confession etc.
10:30 PM	Prepare for bed, guys and girls split off to separate sleeping areas
11:00 PM	Lights Out

Friday: We will have the same morning activities but will stay at SMQA for the remainder of the day.

12:00pm Conclusion of the Mission: Flint and **Pick Up Time.**

Basic Rules:

1. Respect for all adults and participants is required. If you have issues with another individual that cannot be settled, please speak to the Coordinator rather than talking about the issues with others and stirring up hostilities. Reconciliation is an expected attitude.
2. Private technology such as cell phones and iPod's may be used when the Coordinator or adult supervisors allows. If the Coordinator or adult supervisor feels you are taking advantage of or abusing the privilege, your technology device may be taken for the remainder of the week. They should never disrupt discussion or prayer time.
3. Stay within the boundaries set by the Coordinator or adult supervisors whether you are at the host church, the work site, or elsewhere. Breaking boundaries is cause for being sent home, day or night.
4. No "coupling." There should be no public or private displays of affection such as hugging, kissing, lap sitting, cuddling, etc. Disregarding this rule may be cause for being sent home, day or night.
5. Alcohol/Drug/Tobacco use is not allowed or tolerated. You will be sent home no matter what, day or night.
6. This is a work mission trip; you are expected to keep working throughout the day. If you are persistently found "taking a break" you may be asked to return home.
7. Sleep is essential for a long week of working! Lights out is lights out. If you are found to be disturbing others by taking, or repeatedly getting out of your sleeping bag, you could be sent home.

Packing List

- Sleeping Bag, cots, air mattress optional
- Pillow
- Towels, wash cloths
- Toiletries, deodorant, toothpaste & brush, soap, shampoo etc
- Backpack or bag to hold change of clothing, towel, and toiletries for shower time
- Clothes for the week. (You will want clothes to wear when working during the day and clean clothes for the evening)
 - Modest Clothing all week. Skimpy Tanks, Short Shorts, offensive T-shirts not welcome. All t-shirts should have sleeves.
 - Suggested clothes for possible painting, clothes that you do not mind if they get ruined.
 - Shoes that you do not mind getting paint on.
 - Socks
 - Bathing suits for showers if you want
 - Pajamas
 - Sandals/flip flops
- Sun block
- Money...not really needed unless your nice chaperone stops for a coffee or ice cream.
- Bible
- Rosary
- Journal/pen if you would like
- Games/cards/sports equipment for free time
- CELL PHONES...are allowed but kept in rooms. Not allowed at work sights (to prevent theft) and not allowed out during day and evening programs.
- Personal Snacks allowed in eating area, but not allowed in sleeping areas.
- Everyone is asked to bring a snack to share.
- Chips, candy cookies, etc. Homemade baked goods are always welcome.

Please keep these first three pages for your reference. The final two pages must be turned in when registering with your parish.

Health History and Medical Release Form

Name _____ Sex _____ Birth date ____/____/____
Graduation Yr _____

Address _____ City _____ State _____
Zip _____

Youth phone number _____
Youth email _____

Parents/Guardian names _____
Parent email _____

Home Phone (____) _____ Work Phone (____) _____
Cell Phone (____) _____

Health History

Family Doctor _____
Telephone Number (____) _____

Family Insurance Provider/Health Plan

Health Plan Number (include expiration date if applicable)

Allergic Reactions: Please list all known allergies-plant, insect, food, medicine and type of reaction.

Please indicate any other medical problems/situations pertinent to your child:

Any emotional/psychological limitations or reactions to be aware of? _____ If yes, explain:

Is the student presently taking any medication? _____

All medication is to be well labeled with clear, concise directions indicated here (frequency, dosage, reason needed, etc.)

In an emergency, and if unable to reach parent/guardian, we should contact:

1. Name _____
Phone (_____) _____

2. Name _____
Phone (_____) _____

Transportation:

I attest that I have permission to ride with approved chaperones:

Labor:

I attest that my child is physically capable of doing labor required for this project (painting, cleaning, lifting light to medium weight items, scrubbing, and other tasks approved by the Diocese of Lansing):

Permission for Emergency Medical Treatment

In case of emergency, I hereby give permission to transport my child to the nearest hospital/emergency center for emergency medical or surgical treatment. I will be contacted as soon as possible and will be advised prior to any further treatment by the hospital or doctor.

Signature _____ Date _____

Consent Form:

I hereby consent to participation of my son/daughter, _____ to attend the Mission: Flint Work Camp, Jul 30-Aug 4, 2017. I understand the event described in the upper portion of the sheet, including all the details mentioned. I consent to my child(ren)'s participation. I understand that no event, including the one described above, is without risk of significant injury. Nevertheless, on behalf of myself and my child(ren), I voluntarily waive any liability of any sort that might arise on the part of the Catholic Diocese of Lansing, St. Mary's, or any cleric, administrator, teacher, employee, volunteer, agent, chaperone, parent, or student, in connection with this event. My signature attests to my understanding, consent, and waiver, as set forth in this paragraph.

I hereby consent to the participation in interviews, the use of quotes, and the taking of photographs, movies or video tapes of the participant named above. I also grant to the right to edit, use, and reuse said products for nonprofit purposes including use in print, on the internet, and all other forms of media. I also hereby release Catholic Diocese of Lansing, The Catholic Media Project, and local parishes, their agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

Parent/Guardian Signature Date _____

Participant Covenant of Conduct:

In all activities under the sponsorship and/or guidance of my church, I am a representative of the Christian community and I am responsible for my actions. I know God loves me. I will live and work in response to that love. I understand the guidelines below are ways of being responsible and loving.

1. I will respect the property of the facility and personal property of others. I will not be destructive.
2. I will not use drugs, alcohol or tobacco while participating in church functions, nor will I be in possession of them.
3. I will report to the leader any harmful behavior I am aware of by others.
4. I will respect the ministry team and do as they ask.
5. I will respect the rights of others and not verbally, emotionally, or physically abuse or harm anyone.
6. I will participate to my fullest ability knowing that hard work is expected for hours at a time.
7. I will have a positive attitude and not whine or complain.
8. I will only use my personal technology devices as the leaders allow.
9. I understand that my safety is a major concern and will not wander off or leave designated areas without adult approval, and will not solicit conversations with unknown people beyond saying hello.
10. I will bring a passion to help those in need of decent housing without judgment.

To be completed by PARTICIPANT

I, _____, have read this covenant and understand it. To the best of my ability I agree to abide by it. Should I break the covenant, I agree to accept the consequences decided upon by the ministry leaders.

Name: _____
Signature Date

To be completed by the PARENT(S) / GUARDIAN(S) of the participant

I/We, _____, have reviewed this covenant with my / our child and understand it. I / We support the ministry leaders and will be responsible for expenses incurred as a result of our child breaking the covenant.