

2018 Southwest Region Arizona Love-In:

January 27-28

Unity of Prescott, 145 S Arizona Ave, Prescott, AZ 86303

Registration Checklist for Parents and Sponsors

Registration Forms Due: January 9th

Payment and Online Registration Due: January 16th

Payment Information: Payments may be made by credit card or by check.

- **Credit Card.** Please inform your Youth Director if you will be paying by credit card. If paying by credit card contact Angie at AngieUnityYM@gmail.com for instructions.
- **Check.** If paying by check, please turn your registration fee (\$65) into the Director/Minister before January 16th.

Fee. Please submit the total registration fee (taking into account late fee or credits)

<u>Registration Fee:</u>	\$65.00
Late Fee (\$10 after Jan 16th)	+\$10
Credit: (church support)	- _____
TOTAL REGISTRATION FEE DUE	= \$

CHECKLIST: Complete and return the below forms to your Youth Director before the deadline:

1. Medical Release Form 2017-2018 (Unless attendee has attended an event since Fall 2017)
2. Liability Form 2017-2018 (Unless attendee has attended an event since Fall 2017)
3. Recommendation Form for 2017 Fall Unitreat. (for all attendees)
4. SW Region Group Agreements 2017-2018 Y.O.U. and Adult

ONLINE REGISTRATION: Once you have turned in all completed paperwork to your youth director, the last step is to register online before January 16. Your Youth Director will email you the link after your group has turned in the initial paperwork.

- **It is very important that each participant complete the online registration by January 16. It is through the online registration that we can purchase supplies and food for meals. If you have not received the online registration link by January 12, check your bulk folder or ask your Youth Director.**

Note: payment is expected for anyone who has registered of January 16. Any cancellations from this date forward will not be reimbursed, however a \$30 credit can be applied to a 2018 event.

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Name of Participant: _____

Name of Unity Church Attending: _____

Emergency Contact Name, relationship to participant: _____

Emergency Contact Phone Number: _____

Parent/Guardian Email: _____

Y.O.U.: Who will be your on-site Adult? _____

PARENT RECOMMENDATION: Required for all Y.O.U.

I am confirming that my child:

1. Is actively involved in a Unity Church in the SW Region.
2. Independently follows directions and engages in group activities.
3. Demonstrates the ability to follow group agreements.
4. Is dedicated to their spiritual growth and learning, and is respectful of others choice to do the same.
5. Will arrive on time (Saturday Jan. 27 10:00-10:30am) and will stay throughout the scheduled event (closing Sunday Jan 28 10:30am) I understand that I am responsible for my child's transportation to and from the event.

****I understand that my child must be able to transition easily between activities, participate in group activities, and be independent in care, as the SW Region does not have 1:1 staff, special needs training or psychological personnel available. If teen is taking medication that interferes with participation in scheduled activities, or has recently had significant life events, I understand that this retreat may not be a good match at this time, and I will discuss this issue with my youth director and regional consultant before moving forward with registration.**

Signature of Parent/Guardian

Date

CHURCH RECOMMENDATION: Required for ALL participants.

I verify that this participant

1. Is actively involved in our teen ministry. Please list # of classes they have attended between 11/1/2017 and 1/7/2018. Recommended attendance is 5 classes during this time. If less than 5, please give reasons why you feel this participant should attend, and/or ways teen has supplemented their spiritual practice during their time away:

2. Demonstrates and understanding of, and adherence to all event agreements and regional policies.
3. Is approved by this ministry to attend this event as a youth participant or adult sponsor. This ministry agrees to work with Teen Consultant if any follow-up is needed regarding behavior, agreements, and/or issues that arise at this event.

Signature of Minister/ Youth Director/ Spiritual Leader

Date

About Payment & Cancellation: Payment is expected for anyone who is on the group summary form as of Jan. 16. Any no-shows or cancellations from this date forward will be able to apply \$30 to a 2018 regional event. **I have read and understand the payment & cancellation policy:** _____ (Initials of parent/adult participant)