Office Use Only Credit Card: Cash: CR#: Initials:



Camper Registration Form Deadline to register is June 30th Or until we have 200 campers.

ARCHDIOCESE OF LOS ANGELES, ST. JOHN VIANNEY CHURCH YOUTH ACTIVITY PERMISSION FORM FORM #E.2.1

YOUTH ACTIVITY	Summer Day Camp July 8 -	July 19, 20	024		
CHILD'S NAME	F	FAMILY C	HURCH	D#	
ADDRESS (Street)					
(Street)	(City)				(Zip)
SCHOOL	GRADE (Fall 2024)	E	BIRTH DA	TE	
T-SHIRT SIZE: (Circle one) Adult	/ Youth (Circle one) XS	SM N	MD LG	XL	2XL
Will he/she need to take any type of YES NO If YES the Corpus Christi Center.	medication during camp for aller S, please submit a Medical Autho	gies or chr prization ar	conic medi nd Permiss	cal cor sion Fo	nditions? orm available in
Is there any important information that aware of (example: ALLERGIES)?	nat you feel as a parent/guardian t	that SUMN	MER DAY	CAM	P needs to be
FATHER/GUARDIAN'S NAME		_ PHONE			
MOTHER/GUARDIAN'S NAME _		_ PHONE	2:		
PERSON (OTHER THAN PAREN	T) TO NOTIFY IN CASE OF E	MERGEN	CY:		
NAME	RELATIONSHIP		PHON	Е	
I, THE PARENT (GUARDIAN) OF THE A PARTICIPATION IN THE YOUTH ACTIV CONFORM TO DIRECTIONS AND INST RESPONSIBLE FOR YOUTH ACTIVITIE	/ITIES NAMED ABOVE. I AGREE TO TRUCTIONS OF PARISH, SCHOOL O	O DIRECT N	MY CHILD	TO COO	OPERATE AND
I AGREE THAT IN THE EVENT MY CHI NAMED YOUTH ACTIVITIES, INCLUD CAUSED BY THE NEGLIGENCE (ACTIV ACTIVITIES PROGRAM, OR ANY OF IT RESULTING HOSPITAL, MEDICAL OR ACCIDENT, HOSPITAL OR MEDICAL IN	ING TRANSPORTATION AND FROM VE OR PASSIVE) OF THE PARISH/SO IS AGENTS OR EMPLOYEES, RECO RELATED COSTS AND EXPENSES	A THESE AC CHOOL OR DURSE FOR WILL FIRST	CTIVITIES, ARCHDIO THE PAYM FBE HAD A	WHETI CESAN IENT OI AGAINS	HER OR NOT YOUTH F ANY ST ANY
I AM NOT AWARE OF ANY MEDICAL O TO PARTICIPATE IN ANY SUCH ACTIV		ENDERS IT	INAPPROI	PRIATE	FOR HIM/HER
I HEREBY GIVE PERMISSION TO THE PERSONNEL THEN PRESENT TO RENE PHYSICIAN.					
I, HEREBY, AUTHORIZE THE MAKING OF SAID EVENT. I, HEREBY, WAIVE TH		RECORDIN	NGS, OR OT	THER M	1EMORIALIZING
ADULT LEADER(S)B	ecky Cerda, Briza Escobar				

PARENT/GUARDIAN'S SIGNATURE _____ DATE _____

ARCHDIOCESE OF LOS ANGELES FIELD TRIP PERMISSION FORM FORM #E.2

FIELD TRIP TO: Los Robles Park

TIME AND DATE: <u>Tuesday, July 9, 2024 from 9:00 am – 11:30 am</u> and Tuesday, July 16, 2024 from 9:00 am – 11:30 am

MEANS OF TRANSPORTATION:	Walking
trip. As condition of being allowed to do s for personal injuries, property damage that trip described above, whether or not such i the school or its employees. Should it be r participating in the trip, I hereby give the s medical service and give permission to the	be permitted to participate in the above field so, I hereby, release and discharge the school from any and all claims my son/daughter may suffer as a result of participating in the field njuries or damage are caused by the negligence (active or passive) of necessary for my son/daughter to have medical treatment while school personnel permission to use their judgment in obtaining physician selected by the school personnel to render medical te by the physician. I agree to relieve the school and other adults on with this request.
I UNDERSTAND THAT MY INSURANCE BENI	EFITS THAT ARE EFFECTIVE HAVE LIMITED APPLICATION.
PARENT/GUARDIAN SIGNATURE	DATE
HOME PHONE	WORK OR CELL PHONE
FIELD TRIP TO: <u>Raging Waters</u>	5
TIME AND DATE: We	dnesday, July 17, 2024 from 9:00 am to 5:00 pm
MEANS OF TRANSPORTATION:	Buses
trip. As condition of being allowed to do s	be permitted to participate in the above field so, I hereby, release and discharge the school from any and all claims my son/daughter may suffer as a result of participating in the field

trip described above, whether or not such injuries or damage are caused by the negligence (active or passive) of the school or its employees. Should it be necessary for my son/daughter to have medical treatment while participating in the trip, I hereby give the school personnel permission to use their judgment in obtaining medical service and give permission to the physician selected by the school personnel to render medical treatment deemed necessary and appropriate by the physician. I agree to relieve the school and other adults participating from any liability in connection with this request.

I UNDERSTAND THAT MY INSURANCE BENEFITS THAT ARE EFFECTIVE HAVE LIMITED APPLICATION.

PARENT/GUARDIAN SIGNATURE

DATE

HOME PHONE

WORK OR CELL PHONE

PICTURE PERMISSION FORM

I, hereby, give my son/daughter, ______, permission to participate in the group photo that will be duplicated and distributed to the campers and Counselor members of his/her group as a memorial of Summer Camp 2024. I understand that my child's name will not be included in the photo.

Parent	Signature
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Saint John Vianney has my permission to use my child's photograph publically to promote Summer Day Camp. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Date

Parent/Guardian's signature:	Date
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MOVIE PERMISSION FORM (For Pre-K thru 8th grade only)

I, hereby, give my son/daughter, ______, permission to watch the film **Moana** rated PG on Thursday, July 18, 2024.

Parent Signature

Date

Summer Camp Fees

We can only accept 200 campers!

Please Note:

- A spot for your child(ren) is reserved based on the registration form filled out completely, the fees are paid in
 - full, and returned to the Corpus Christi Center.
 - Pricing is calculated for 2 weeks of camp and field trip fee

• Family Discounts are for SIBLINGS ONLY

Campers (3 yrs old (potty trained) to 8th Grade) Camp Pricing is listed as follows: <u>1st/only child is</u> \$350 with field trip; \$300 for 2 weeks and WITHOUT field trip

> SIBLING DISCOUNT: <u>2nd child</u> is \$300 WITH field trip; \$250 WITHOUT field trip <u>3rd child</u> is \$250 WITH field trip; \$200 WITHOUT field trip

There will be a \$5 processing fee if paid with a card Please return application <u>with full payment</u> by June 30, 2024 to the Corpus Christi Center unless registration has been closed due to maximum enrollment. (\$10 increase if not paid in full by June 30th, 2024) No registrations will be accepted after July 3rd!

Questions? Contact: Briza Escobar, Director at (626) 330-2269 ext. 231 or <u>sjvsdaycamp@gmail.com</u>

ACKNOWLEDGMENT OF RECEIPT

OF

GUIDELINES FOR ADULTS INTERACTING WITH MINORS

AT PARISH/SCHOOL ACTIVITIES OR EVENTS

Revised 8/2007 ~1/27/10 ~Revised 6/8/2010 ~ Revised 2/2015

I have received and agree to comply with the *Guidelines for Adults Interacting with Minors at Parish, Parish School, Youth Ministry or Religious Education Activities or Events* of the Archdiocese of Los Angeles. As stated in the copy of these guidelines: **"All adults working or volunteering with minors are also accountable to follow all policies contained in any other 'Handbooks' that the parish/school may use' (i.e.: Catholic Schools Handbook, Parish ministry handbook, etc.).** All adults acting in a staff, faculty, ministerial or other paid or volunteer * position in the Archdiocese are role models who are called to treat each minor with respect and care. Clergy/staff members/faculty/volunteers serving either in a paid or volunteer position need to maintain professional relationships with minors whether on or off the parish or parish school locations." These guidelines are part of the commitment of the Archdiocese of Los Angeles to keep children and youth safe and to provide a role model for all minors under our care.

Activity(ies) or Event(s) in which I am involved:

-		 	
-			
Name (nlease	print legibly)		
Name (please	print legibly):	 	

ARCHDIOCESE OF LOS ANGELES GUIDELINES FOR ADULTS INTERACTING WITH MINORS AT PARISH OR PARISH SCHOOL ACTIVITIES OR EVENTS Revised 2/2015

Adults acting in a staff, faculty, ministerial or other paid or volunteer position in the Archdiocese are role models who are called to treat each minor with respect and care. Clergy/staff members/faculty/volunteers serving either in a paid or volunteer position need to maintain professional relationships with minors whether on or off the parish or parish school locations. Please review the following guidelines and sign the "Acknowledgement of Receipt" for the file at the parish or school where you work or volunteer.

- If clergy/staff members/faculty/volunteers who are supervising minors observe a situation where civil law, parish and/or school rules are being violated, they must take appropriate action immediately.
- Clergy/staff members/faculty/volunteers should always be aware they have considerable personal power because of their ministerial positions. Therefore, they will maintain respectful ministerial relationships, avoiding manipulation and other abuses of power.
- Clergy/staff members/faculty/volunteers must avoid assuming the role of a "father or mother figure," which may create an excessive emotional attachment for all parties.
- Attraction between adults and minors is possible, and care and caution should be taken in all interactions. The parish/school administration should be informed immediately if such an attraction exists. Dating or sexual relationships between a clergy/staff member/faculty/volunteer and a minor are inappropriate and unethical. Dating or sexual relationships between a clergy/staff member/faculty/volunteer and a minor are unlawful.
- Communications with minors (e.g., notes, letters, e-mail and Internet exchanges, telephone calls) must be for professional reasons only.
- Discussions of a sexual nature must always take place in an appropriate educational context. Sexual jokes, slang or innuendo are inappropriate when interacting with minors.
- Clergy/staff members/faculty/volunteers will respect confidential information concerning minors or confidential information of a personal nature shared by a minor. However, if a minor shares confidential information that could pose a threat to the minor or to others, the clergy/staff member/faculty/volunteer has an obligation to notify the proper authorities.
- When clergy/staff members/faculty/volunteers are supervising minors or young adults at parish or parish school- sponsored activities, they may not be under the influence of alcohol, may not consume alcohol in the presence of persons under age 21, nor offer alcohol to them.
- When a clergy/staff member/faculty/volunteer is alone in a room with a minor, the door must be open, or there must be clear visibility through windows.
- Clergy/staff members/faculty/volunteers are to engage in games or sports activities with minors only in the presence of other adults, or in a place openly accessible/visible to others.
- Clergy/staff members/faculty/volunteers planning parish/school events in their homes with minors must have the permission of the parish/school administration. In addition, clergy/staff members/faculty/volunteers may not have any minors in their homes without the knowledge of the minor's parent or guardian.
- Clergy/staff members/faculty/volunteers may not drive minors unless it is to or from a parish/parish school- sponsored activity and may never drive alone with a minor. Driving minors requires parental permission slips that indicate the transportation is by personal vehicle. The parish/parish school administration must approve any use of personal vehicles. Trips involving minors must have a sufficient number of adult chaperones and minors to preclude the appearance of inappropriate personal involvement with minors.
- Parent/guardian written permission is required for the publication of a picture of a minor.
- Adults are permitted to interact alone with minor/minors only after complying with Archdiocesan policies regarding fingerprinting and safe environment training.