



Name: _____

Grade (2017-18): _____

Parish: _____

School: _____

Home Phone: _____

Cell: _____

Email: _____

All participants will receive a t-shirt at check-in. Please select your shirt size (all are adult sizes)

Small Medium Large X-Large 2X - Large

Breakout Session Selection ó participants will attend 2 sessions during the day. We will do our best to give participants their top choices ó **please rank your preferences 1 – 8** (session descriptions can be found on the back of the event flyer and online at www.icglenville.com/youth-rally)

Be Bold _____

Be Strong _____

Be Courageous _____

Quest and Questioning _____

Saints Among Us _____

Horton Hears a Who ó Can You? _____

Catholic on the Field of Dreams _____

Turn it up! _____

YOUTH AGREEMENT

I agree to abide by all rules and regulations decided upon by the Youth Rally Planning Committee and leadership personnel of the event. I will project an image of Christian consideration, sensitivity and respect to everyone and property in my language, dress and behavior. I understand that failure to follow the rules or to cooperate with leadership directions will result in the immediate dismissal from the Youth Rally.

Signature of Youth Participant

Date

CONSENT, RELEASE & MEDICAL INFORMATION

I, the below signed, Parent/Guardian hereby authorize and give my consent for my son/daughter to attend "Be Strong. Be Bold. Be Courageous", the Diocese of Albany Youth Rally on September 17, 2017 to be held at Church of the Immaculate Conception, Glenville, NY.

I understand that a variety of activities are planned throughout the day and grant permission for my child to participate. I relieve the Roman Catholic Diocese of Albany, Church of the Immaculate Conception (host site), and all parishes of the Twin Rivers Vicariate (sponsoring parishes) of all liability in the event of an injury.

I authorize representatives and chaperones of the Youth Rally to obtain medical treatment, should it be necessary.

I grant permission for my son/daughter to be photographed (both moving and still) and further authorize that any and all pictures/videos may be used or released in local and diocesan newspapers, flyers, online via diocesan/parish facebook pages and/or websites.

My son/daughter has the following allergies, medical conditions or dietary restrictions which the leadership of this event should be aware of:

Parent/Guardian Name(s): _____

Parent/Guardian Best Contact Number: _____

Date _____

Parent/Guardian Signature: _____

In the event of an emergency and the above-named parent/guardian cannot be reached, please provide another adult contact:

| Name of contact | Relationship to Youth | Contact Number |
|-----------------|-----------------------|----------------|
|-----------------|-----------------------|----------------|

Please return complete form and \$12 registration fee by August 28, 2017 to:

**Youth Rally Registration
Church of the Immaculate Conception
400 Saratoga Road, Glenville, NY 12302**