



Episcopal Diocese of Texas Happening Lock-In Application



Guidelines & Information Sheet

Who may attend?

Any student in 10th - 12th grade who has **already** attended Happening may attend Lock-In. Adults who are involved in youth ministry are also encouraged to attend Happening and then come to lock-in.

What is the Registration Policy?

You must submit a completed application with amount of either \$30 for 1 night or \$40 for 2 nights. Applications must be complete including insurance information as well as a **copy** of your insurance card and signed covenant. **Applications are now being kept on file for a 1-year term (August to April) to cut down on paperwork.** Each August a new completed application, signed covenant and copy of insurance card are required. After your first application is on file for the year – you can just email the registrar, Andrea LaMore at amlamore@comcast.net or send her a message on facebook and bring your payment with you.

Note – it is really important to let the registrar know prior to you coming so that we can make sure that the cooks are aware of how many to prepare for.

What is the Registration Procedure?

- Complete the application
- Read and sign covenant
- Copy of your insurance card
- Send **ONLY** the application and keep this page for quick reference.
- Mail form with **\$30** (1 night) or **\$40** (2 nights) fee to: ***Happening Registrar
C/O Andrea LaMore
23007 Lodge Meadows Drive
Katy, Texas 77494***

Please make checks payable to: Happening

What if I cancel?

Your fee, if already paid, will roll to the next Lock-In.

Where and When are the Lock-In's?

Lock-In takes place four times a year at Camp Allen – Campsite 1. The weekend begins on Friday evening at 6 p.m. Saturday arrivals between 1-3 p.m.

- #132 August 20-22, 2010 (**deadline Aug 13th)
- #133 November 19-21, 2010 (**deadline Nov 12th)
- #134 January 21-23, 2011 (**deadline Jan 14th)
- #135 April 29 - May 1, 2011 (**deadline April 22nd)



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You must have attended Happening in order to attend Lock-In

Name: _____ M or F What you go by: _____

Address: _____ City: _____ State: _____ Zip: _____

H) Phone: _____ Cell: _____ Parent/Guardian Cell: _____

Home Church: _____ City: _____ Phone: _____

Age: _____ Birth Date: ____/____/____ Grade: _____ Vegetarian Food Allergy _____

Email: _____ Parent Email: _____

*** Confirmation will be sent via email, if available ***

Attended: Happening # _____

- FRI ARRIVAL between 6 – 7 p.m.
- SAT ARRIVAL between 1 – 3 p.m.

CAMPSITE 1

\$40 for 2 nights (Fri. & Sat.) OR \$30 for 1 night (Fri. or Sat.)
Non-refundable – Make checks payable to **Happening**

Note – a light meal will be served Fri. night at 6 p.m.

#132 August 20-22, 2010 (**deadline Aug 13th)

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#133 November 19-21, 2010 (**deadline Nov 12th)

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** Until weekend is full, applications will be accepted after the deadline – contact the registrar.

I/my child, _____, has my permission to attend and to participate in Happening, to be held at Camp Allen in Navasota, TX sponsored by the Episcopal Diocese of Texas. I represent that my child/self is healthy and capable of participation in said event without causing risk of danger, illness or accident to him/her/myself, or to others. I agree to hold harmless the leaders of my church, leaders of other churches involved, the event coordinators, the Bishop of Texas and the Diocese of Texas in the event of any accident or injury. In the event that my child requires medical attention while attending the event, I understand that an adult sponsor of the event will make every reasonable attempt to contact me. In the event that I cannot be contacted, I consent to any medical attention deemed appropriate. In the event that treatment is called for, which the medical provider refuses to administer without consent, I hereby authorize an adult sponsor to give such consent for me if I cannot be contacted immediately, or because of an emergency, there is no time or opportunity to make contact. In the event that it is necessary for that person to give consent, I agree to hold such person free and harmless of any liability for damages arising from giving such consent. Please list all allergies, medical problems, medications currently being taken by participant, or any other pertinent information below. Please notify the Event Coordinator or Nurse if this participant has been exposed to any communicable disease 3 weeks prior to this event. In addition to the medical considerations mentioned above I hereby grant permission for the Happening Steering Committee to use the candid photos of my child or myself taken as part of the Happening experience in promotion of future Happenings and on the Happening Texas Internet site. I declare that my child/self is covered by medical insurance and/or that I am responsible for any and all expenses incurred by my child/self whether covered under insurance or not. **(NOTE: The Sponsors of this event DO NOT provide insurance in case of injury or illness.)** ****IMPORTANT - ATTACH A COPY OF BOTH SIDES OF YOUR INSURANCE CARD****

PARENT/GUARDIAN SIGNATURE _____ Relationship to Participant _____ Date _____

Health Carrier/Policy#/Group # _____

Health Carrier Address & Phone #: _____

Allergies/Reaction/Treatment _____

Medical Conditions/Medicines currently taking: _____

Any over-the-counter medications that the participant MAY NOT receive from adult sponsor (i.e. Tylenol, Advil, Kaopectate, etc)? No
If YES, Please List _____

Emergency Contact and Phone # _____

NOTE: Prescribed Medicines must be in original pharmacy container with correct name, date, instructions, and physician's name on label

Please mail to:
Andrea LaMore, Happening Registrar
23007 Lodge Meadows Dr.
Katy, Texas 77494 (281) 705-4023

Sponsored by the Division of Youth Ministries
Episcopal Diocese of Texas
www.epicenter.org
www.happeningtexas.org
Rev.4/10

Division of Youth - Happening LOCK-IN Covenant

The Division of Youth is charged with providing a "safe place" for all diocesan-sponsored activities. Therefore, the following guidelines convey the minimum expectations concerning behavioral standards. These standards will be maintained and enforced for the health and safety of all involved. These guidelines apply to adults as well as youth.

Respect

The Baptismal Covenant calls for respect for the dignity of others. As applied to diocesan events, this call prohibits hazing (defined as harassing with meaningless, difficult, or humiliating tasks), verbal (including profanity), physical and emotional abuse. Youth and adults must also respect the authority of the adults charged with coordinating events.

Sexual Activity

At diocesan youth functions, young people are participating in activities that will lead to fellowship in, and bonding as, the Body of Christ. Sexual activity is not part of this context and is prohibited.

Weapons, Fireworks, Drugs, Alcohol, Tobacco

Weapons, fireworks and open flames (matches, lighters, candles) are prohibited. The use of alcohol and illegal drugs is prohibited at diocesan youth events. Youth are not permitted to smoke or use any tobacco products while attending diocesan youth events. Adults should refrain from use as much as possible during an event, and never use tobacco in the presence of youth.

Personal Property/Facility Usage

The destruction and/or theft of personal property are strictly prohibited. The destruction of and/or theft from any facilities used for diocesan events are strictly prohibited.

Cell Phone Policy

While it is understood that cell phones are a reality, they can be a distraction during Division of Youth events. While participants who drive themselves to events may be required to carry their cell phones by parents/guardians, we ask that the phones be left in their vehicles. Youth will always be able to make emergency phone calls if the need arises.

Happening Lock-In Covenant

Please read through the following guidelines and initial, acknowledging your agreement to follow the standards set by the Episcopal Diocese of Texas Division of Youth for the duration of the Happening Lock-In.

- _____ 1. I agree to stay in the cabin of my gender only and will not go into a cabin of the opposite sex.
- _____ 2. I agree to leave all trays, cups, and utensils in the dining hall.
- _____ 3. I agree to leave all mattresses and furniture in the cabins and director's quarters.
- _____ 4. I agree to stay in Campsite 1 for the entire weekend unless under the supervision of a lock-in coordinator or lock-in liaison.
- _____ 5. I understand that Campsite 1 consists of the cabins, director's quarters, dining hall, bathrooms, decked areas, and area within the seven cabins.
- _____ 6. I agree to be in bed with the lights out at the time specified by the lock-in coordinators.
- _____ 7. I agree to not drive my car for the duration of lock-in unless given permission by a lock-in coordinator.
- _____ 8. I agree to remain in groups of three or more for the weekend.
- _____ 9. I agree to follow the schedule presented by the lock-in coordinators.
- _____ 10. I agree to use good judgment while participating in video caritas and understand that all material needs to remain appropriate and tasteful.
- _____ 11. I understand that by initialing the above guidelines, I agree to follow this covenant outlined by the Diocese of Texas Division of Youth.

During the course of diocesan events, youth and adults will be held accountable to this agreement. Should any problem arise, every effort will be made to resolve the issue with love and respect. **Continual disregard for this covenant will result in dismissal from diocesan events.** Parents will be informed immediately of any violation and will be responsible for any expenses incurred due to the violation. Adults in violation of said policies are responsible for any expenses incurred and must leave the event. Authority to enforce these guidelines lies with the Youth Missioner or design teams/steering committees responsible for the coordination of the event.

I have read the covenant and agree to participate in **Happening Lock-In** according to the standards described. I understand that my failure to do so may result in me being removed from the community and sent home at my expense.

Participant signature _____ Date _____

Participant name (print) _____