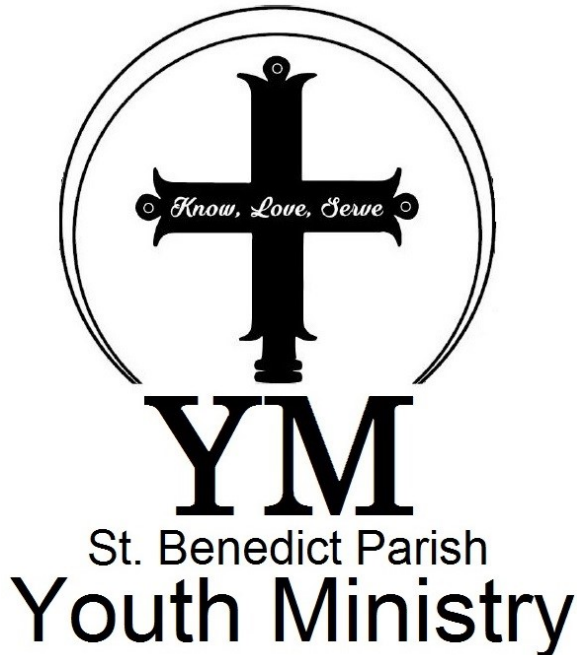


Youth Ministry 2017-2018

* Some Dates may change: times and locations of events are as listed unless announced otherwise

There is NO COST for Youth Group or Youth Ministry events unless specified otherwise.



High School Youth Group (Grades 8-12)
Sundays at 7PM at St. Mary's Yellow House* and G.I.F.T. Assemblies.

Middle School Youth Group (6-7) meets
Six Saturdays after the 5 PM Mass as
part of K-7 G.I.F.T. at St. Mary's

Sep. 30th—Nov. 18th—Jan. 30th—Feb. 3—Mar.
10th—Apr. 14th

as well as the Sunday G.I.F.T. Assemblies

* Excluding Holiday Weekends and Superbowl Sunday

Look for other Youth Ministry Events in 2017-2018...

- Fall Retreat (Date & Time TBD)
- Christmas Caroling in December
- Fall Movie Night
- Fall Bowling Night
- Spring Retreat (Date & Time TBD)
- Service Camp 2018 Next Summer

Connect with Youth Ministry on Social Media...



On Facebook

St. Benedict Youth Ministry



On Instagram

stbenedictyouthministry

Plus the Youth Ministry blog every other Sunday September through May!

Check the Bulletin and the Parish Website for updates on Youth Ministry Opportunities!

----- **stbenedictionline.org** -----

To enroll, complete the registration form found in church or print one from stbenedictionline.org and submit it to Andrew Uttaro in the Parish Office or email it to auttaro@dor.org.

Questions? Contact Andrew Uttaro at andrew.uttaro@dor.org or at 585-394-1220 Ext. 41

Youth Group 2017-2018

Registration

Family last name: _____ Home phone: _____

Father's name _____ Cell/Work phone _____

Mother's name _____ Cell/Work phone _____

Address _____ Zip _____ Email _____

Secondary Emergency Contact if parent/guardian cannot be reached:

Name _____ Home Phone _____ Cell _____

Name of Teen/Youth:	M Or F	Date of Birth	School Attending	Grade Level as of Sep. '17

Allergies and/or Special Needs: Please tell us if your child has any allergies and/or special needs

Child's Name	Allergy and/or Special Need:

Sacramental Information: Please list any sacraments that your child(ren) have celebrated

Child's Name	Sacrament: Baptism, First Communion, First Penance, Confirmation	Location where Sacrament was celebrated

FAMILY RELEASE FORM and MEDICAL CONSENT

I, _____, the parent or legal guardian of _____
(Name of Parent/Guardian) (Names of Children)

authorize the employees, representatives and chaperones of St. Benedict Parish to obtain emergency medical treatment, should it be necessary, during my child's attendance and participation in Youth Ministry and Confirmation sessions. I consent and give permission for my child's participation and attendance in this activity/program. In consideration of my child's attendance and participation, I hereby, for myself, my heirs, executors, administrators and assigns, waive and release any and all claims for damages I may have against of St. Benedict Parish, Diocese of Rochester, New York, their representatives, chaperones, employees, successors and assigns arising out of any and all injuries by my child while participating in this activity/program. **I understand that I will be notified immediately should it become necessary to obtain emergency treatment. The person(s) who should be notified and the telephone number(s) are:**

NAME _____ PHONE _____

I also hereby consent to and authorize the use and reproduction by the parishes of St. Benedict Parish, or anyone authorized by them, of any and all photography, still or in motion, and/or all audio recordings in which this student appears. I also acknowledge that we will not be paid compensation for any reproduction of these materials. All negatives, prints, and audio tapes are the property of St. Benedict Parish parishes.

Parent/Guardian's Signature _____ Date _____

CODE OF CONDUCT FOR MINOR CHILDREN INVOLVED IN PARISH PROGRAMS

As a student in St. Benedict Parish programs, I understand and agree to follow the rules and regulations as determined by the parish, and the Diocese of Rochester for this activity/program. I also understand and agree that I will notify my parent or guardian at the time of any violation requiring my dismissal from the program/activity and that I will be sent home at my own and/or parent's/guardian/s expense. The purchase, possession or consumption/use of alcoholic beverages or other illegal drugs will not be tolerated. Failure to comply will result in immediate dismissal from the event. This policy also applies to adult volunteers and chaperones. Minors will not be allowed to smoke cigarettes or to use tobacco products, including chewing tobacco. Participants are expected to obey the directions of adults in charge (catechists, youth group leaders, chaperones). Participants are representing their parish community. Appropriate behavior and language are expected. No dangerous or rough play will be tolerated. Final decisions regarding acceptable behavior/consequences are the decision of the staff person in charge. In general, if the behavior of a minor child results in his/her dismissal from the program, it is the responsibility of the parents/legal guardians to provide, at their own expense, transportation for the dismissed child. If a child is dismissed from an off site event and an adult chaperone must accompany the child home, the parents/legal guardian are responsible for any related expenses.

Parent/Guardian's Signature _____ Date _____

After completing this form, please send it along to Andrew Uttaro at the parish office:

95 N Main St, Canandaigua NY 14424.

Questions: Contact Andrew at 394-1220 ext. 41 or email andrew.uttaro@dor.org