

February 2024 Unitarian Universalist Church of Tallahassee Overnight Youth Con Registration Form

Friday 2/9 - Sunday 2/11 at UUCT

2810 N Meridian Rd
Tallahassee, FL 32312

Email a copy of this completed form to religious.exploration@uutallahassee.org by 2/2/24.

The attending youth must bring the printed completed copy with them to the event along with the \$25 registration fee. Contact religious.exploration@uutallahassee.org with any questions.

Youth Name: _____

Youth Date of Birth: _____ Grade in School: _____

Youth Cell Phone Number: _____

Home Congregation: _____

Parent/Guardian Name(s): _____

Parent/Guardian Cell Phone Number(s): _____

Email Address(es): _____

Home Address: _____

Emergency Contact Name and Phone Number (if parent/guardian(s) unavailable):

Name of Youth's Physician & Physician's Phone Number:

Name of Youth's Health Insurance Provider & Policy Number:

Medical concerns and needs: _____

Accessibility and inclusion needs: _____

Allergies and Dietary Restrictions: _____

Medications: _____

All medications must be held in a safe, secure place.

_____ (Initial) My youth knows the dangers of sharing medication with others, is responsible to follow through on taking all meds, and will secure them to ensure that they are not abused in any way. OR

_____ (Initial) My youth's medications must be secured and administered by a home-group adult advisor.

Notes from parents / guardians on our youth's medications:

Photo/Video Release: Recordings of our youth group activities are sometimes used on our website, social media, and promotional materials. Per our safety policy, only first names of minors will ever be published with their pictures. Please indicate your preference regarding your youth during this event.

_____ I give permission for my youth's likeness to be used by UUCT or UUA publications. OR

_____ I DO NOT give permission for my youth's likeness to be used by UUCT or UUA publications. OR

_____ I give permission for my youth's likeness to be used by UUCT or UUA publications with these limitations:

I give consent for my youth, _____, to participate in this overnight youth con event. I understand that UUCT, nor the UUA, does not accept responsibility for any bodily injury incurred during this event or during transportation to and from the event. I give permission for any emergency medical, surgical, diagnostic, and hospital care, treatment, and procedures to be performed by a licensed physician or hospital when deemed immediately necessary or advisable by a physician to safeguard my youth's health if I cannot be contacted. I understand that UUCT is not responsible for transporting my youth to and from the event.

Con-Noodle is sponsored and planned by our UUCT Youth Group. In celebration of February and Side with Love's Thirty Days of Love, this con will explore UU values and ideas around love, empowerment, trust, and pasta! **One scheduled activity will include an activity from [Grades 7-9 Our Whole Lives \(OWL\)](#) Sexuality Education. This activity will be the only workshop facilitated by adult advisors.**

_____ My youth is in grade 7 or above and has permission to participate in the OWL workshop. OR

_____ My youth is in grade 6 and has permission to participate in the OWL workshop. OR

_____ My youth does NOT have permission to participate in the OWL workshop.

Youth Group Con Rules & Expectations:

- No substance abuse of any kind, including smoking, vaping, alcohol, & drugs illegal for youth. This includes adults, even if something's legal for them.
- No sexual behavior or public nudity.
- No violence or threats of violence.
- One body, one sleeping bag, one blanket.
- Puppy piles / cuddle puddles are welcome in public spaces (not sleeping spaces).
- Everyone is encouraged to engage in scheduled programming. If you need to step away for self-care, please let your advisors know.
- Stay on-site and within boundaries.
- Respect the site. We share this sacred space with our church and want them to be in awe of our youth! Take care of buildings, grounds, and equipment.

I understand that my youth will be spending the night and that there will always be a minimum of two adult advisors present to provide adult supervision. I have discussed the Rules & Expectations with my youth and we both understand them and are clear that breaking them can result in being asked to leave the event immediately.

We understand and consent to the above rules and expectations for the UUCT Youth Con.

Signature of youth participant:

_____ Date: _____

Signature of parent/guardian:

_____ Date: _____

Signature of adult home-group advisor**:

_____ Date: _____

**Signing home-group advisor must attend this youth event with the youth named on this form in the capacity as Con advisor. This advisor agrees to be present for the entire Con. All adult advisors will work together to ensure safety for all attendees. Home-group advisors will be responsible for managing any additional home-group-specific safety policies. Adult advisors must be over 25 years old and approved for this role by the home congregation.

Packing & Check List

- ☐ Completed Con Registration Form signed by youth, parent/guardian, and home-group advisor
- ☐ Registration fee \$25 in cash or check
For digital payment options, contact religious.exploration@uutallahassee.org
- ☐ Spending money for travel to and from the Con, just in case (ask your home-group advisors to be sure)
- ☐ Costumes, props, music, instruments, etc. for the Talent Showcase
- ☐ Non-electronic games
- ☐ Sleeping bag, blanket, pillow, sleeping pad, etc.
- ☐ Toiletries
- ☐ Clothing for two days
- ☐ Extra pair of clean socks for Sock Wrestling that you're not too emotionally attached to (they might get stretched out!)
- ☐ Medications / Vitamins
- ☐ Your talent and creativity!