



## 22<sup>nd</sup> Annual Diocesan Jr. High Rally

***Be on your guard, stand firm in the faith, be courageous, be strong.  
Your every act should be done with love.***

***1 Corinthians 16:13-14***

Come join over 700 Jr. High youth (6<sup>th</sup> – 8<sup>th</sup> Grade) and adults from around the diocese as we celebrate the 22<sup>nd</sup> Annual Jr. High Rally on November 2, 2019 at White Oak Conference Center! The theme for this year is “Be Courageous!” We invite you to be part of this exciting and action-packed day.

***This year’s keynote is Apex Ministries.***

### ***Apex Ministries***



APeX is two Catholic men (Brad Farmer and Gene Monterastelli) who have made it their lives’ work since 1996 to crisscross North America sharing the Truth and Joy of the Gospel of Jesus Christ. They have crafted a unique style (they call it “Christian Vaudeville”) that engages an audience and creates rapport through telling “parables” through sketch comedy, seamlessly integrating the use of juggling and street performer style skill and intensity. Once an audience is thoroughly engaged, Brad and Gene share personal testimony of spiritual realities and take them deeper in exploring the Catholic themes of their parables. Brad and Gene then challenge the audience to put the concepts into practice in everyday life.

***The band Summit will be leading us in praise and worship music.***



The E-team is already working on thought provoking skits, videos, and plenty of fun activities for a blessed day! Make sure you register for this exciting and challenging day... don’t miss it!

## **General Information**

Date: Saturday, November 2, 2019  
Time: 10:30 a.m. - 6:00 p.m.  
Location: White Oak Conference Center, Winnsboro, SC  
Participants: Students in Grades 6 - 8 ONLY  
Cost: \$40.00 per person *before October 18, 2019*  
\$50.00 per person *after October 18, 2019* (*shirts are not available*)

## **How can your youth and accompanying adults attend this year's Rally?**

Enclosed in this packet are:

Registration Form & Deadline	Schedule of the Day
Directions & Map	Emergency Contact Numbers
Release Forms	Code of Conduct
Insurance Roster	SAFE HAVEN Pastor Compliance Letter

### ***Diocesan Rally Registration Form:***

A diocesan group registration form must be legibly completed. (Please print or type.) Only registration forms completely filled out and accompanied by completed release forms and the correct registration fee will be considered a complete registration packet. Diocesan Rally registration forms are the only form of registration accepted by the Youth Office for this event. You may copy as many of the forms as needed. Please retain a copy of all paperwork for your own records.

### ***Registration Fee:***

The registration fee of \$40.00 per person includes lunch, T-shirt, keynote addresses, and much more. There will be a \$10.00 per participant late fee for those registering after the deadline of October 18, 2019. Please send only ONE check (made payable to the Diocese of Charleston) per group registration packet. EVERYONE attending the Rally must be pre-registered and submit the appropriate release form and registration fee.

### ***Deadline:***

Please ensure that all forms are completed and returned to the Youth Office prior to the registration date of October 18, 2019. Our mailing address is 901 Orange Grove Road, Charleston, SC 29407. Please note that in order to receive the registration cost of \$40.00, your completed registration packet must be received by the Youth Office by the October 18<sup>th</sup> deadline. Postmarks will not be accepted. There will be no exceptions to this rule! Registration packets received after the deadline date will not be accepted unless accompanied by the late fee of \$10.00 per participant. The last day to register is October 25, 2019.

### ***T-Shirts:***

Please make sure that parents/guardians have listed shirt sizes on the release forms, as there will be NO exchanges. Also, if sizes 2X or 3X are requested, please be sure to include an extra \$2.00 per shirt ordered. The largest size shirt available is 3X. If shirt sizes are not included in your registration packet, the Youth Office will order size small for your participants.

**Chaperone Ratios:**

Please help us provide a great experience for the youth by ensuring the safety of our young people through adequate supervision. A ratio of 6:1 youth to adults is preferable. All adults should sit with their young people. Please remember that adult chaperones are responsible for their group of youth.

**Insurance:**

Please note that all Rally youth participants **must** be covered by the diocesan policy. Please check to make sure that your participants have been named to the policy for the period August 1, 2019 to July 31, 2020. For those not currently covered, please submit an additional insurance roster, along with the \$6.25 premium for those being added to the policy for this event.

**Upon Arrival:**

(Registration begins at 9:45 a.m. and concludes at 10:25 a.m.)

A greeter will meet your vehicle and direct the sponsoring adult to the check-in table. Check-in will be done by deanery. (Please do not bring your entire group to the check-in table. All participants, including adults, should wait in the vehicle(s) or a designated area until the sponsoring adult has completed the check-in procedure.)

When you check in, your group will receive an envelope containing:

- A. List of registered youth and adults
- B. Name tags for registered youth and adults. The tags will display the participant’s name, parish, and parish city.
- C. A schedule of the day

Upon completion of check-in, your group will:

- A. Be greeted by a host
- B. Distribute nametags and shirts
- C. Proceed to the auditorium for the opening session

**Schedule:** *(Subject to change)*

9:45 a.m.	Check-in Begins	3:10 p.m.	Session 2
10:00 a.m.	Doors Open/Ice Breakers Begin	4:10 p.m.	Prayer
10:30 a.m.	Opening Session	4:30 p.m.	Mass
11:00 a.m.	Session 1	5:45 p.m.	Dismissal
12:15 p.m.	Prayer/Men Session/Women to lunch		
1:00 p.m.	Men to lunch/Women Session		
2:45 p.m.	Band		

**Emergency Contact Numbers:**

Please use the following numbers for emergencies ONLY:

- White Oak Conference Center -- (803) 635-4685
- Diocesan Director, Deacon Jerry White -- (843) 709-9025 cell

## JH Rally 2019 Parish Checklist

Parish Name: \_\_\_\_\_  
 Parish City \_\_\_\_\_  
 Adult Sponsor: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_  
 Date Registration Received: \_\_\_\_\_

**Fees:**

	# of Adults @ \$40
	# of Youth @ \$40
	Late Fees @ \$10
	Shirt Fees @ \$2
	Scholarships \$40
	Amount Due
	Amount Paid
	Balance due

**Forms:**

	Registration Forms
	Parental and Adult Release Forms
	Chaperone Letter

**Shirts:**

S	M	L	XL	2XL	3XL	Total

**Insurance:**

	Added to Roster
	Paid

**Notes:**

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**Diocesan Youth Rally**  
 Saturday, November 2, 2019  
 White Oak Conference Center, Winnsboro, SC  
Group Registration Form  
Registration deadline: October 18, 2019

Parish: \_\_\_\_\_ City: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Name	Adult/ Youth	Male/ Female	Shirt Size
<input type="checkbox"/> Insurance <input type="checkbox"/> P/R Form			
<input type="checkbox"/> Insurance <input type="checkbox"/> P/R Form			
<input type="checkbox"/> Insurance <input type="checkbox"/> P/R Form			
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<input type="checkbox"/> Insurance <input type="checkbox"/> P/R Form			

**Special Needs/Dietary Restrictions:** \_\_\_\_\_

**Registration Fee of \$40.00 per person** x \_\_\_\_\_ = \$ \_\_\_\_\_

**Additional Shirt Fees of \$2.00 (if applicable)** x \_\_\_\_\_ = \$ \_\_\_\_\_

**Late Fees of \$10 per person (after 10/18/19)** x \_\_\_\_\_ = \$ \_\_\_\_\_

**Total Enclosed \$** \_\_\_\_\_

## **Directions to White Oak Conference Center**

### **From Columbia (Two Ways) -**

1. I-77-Travel North toward Charlotte. Get off at exit 46 (SC 20) and take a left at top of ramp. Travel approximately 3 miles and come to stop sign. Go straight approximately 5 additional miles. White Oak Conference Center will be on your right.
2. Highway 321 North -Take 321 By-pass around Winnsboro, Travel North on 321 for approximately 8 miles until you see White Oak community sign. Turn right at this sign and travel 3/10 mile. First right will turn onto Mobley Hwy. White Oak Conference Center is 1/2 mile on left.

### **From Rock Hill/Charlotte -**

I-77 South to Columbia. Get off at exit 46 (SC 20) and yield right onto SC 20. Travel approximately 3 miles and come to stop sign. Go straight for approximately 5 additional miles. White Oak Conference Center will be on your right.

### **From the Upstate (Anderson/Greenville/Spartanburg) -**

Take I-26 East toward Columbia. Get off at Newberry/Winnsboro exit 74 (SC 34) and take a left at stop sign. Go approximately 35 miles to Winnsboro (US 321). Turn left onto 321 and travel about 6 miles to White Oak. Turn right at sign and continue approximately 3/10 mile and turn right onto Mobley Hwy. White Oak Conference Center is 1/2 mile on left.

### **From the Upstate (Spartanburg/Union) -**

Take Hwy 9 to Chester. Travel South on Hwy 321 from Chester toward Winnsboro about 18 miles until you see the White Oak community sign. Look for gray-rock church on your right. Turn left immediately after you pass this church. Travel 3/10 mile and turn onto Mobley Hwy. White Oak Conference Center is 1/2 mile on left.

### **From Charleston -**

Travel I-26 toward Columbia. Turn North onto I-77 toward Charlotte. Get off at exit 46 (SC 20) and take a left at top of ramp. Travel approximately 3 miles to stop sign. Go straight for approximately 5 additional miles. White Oak Conference Center will be on your right.

### **From Florence/Myrtle Beach Area -**

Travel toward Columbia on I-20. Take I-77 North toward Charlotte. Take exit 46(SC 20) and take a left at top of ramp. Travel approximately 3 miles and come to stop sign. Go Straight for another 5 miles. White Oak Conference Center will be on your right.

## Parent/Guardian Permission and Liability Waiver

**Description of Activity/Event:**

Date(s):  
Type of Event:  
Arrival/Departure Time:  
ER Phone Number:  
  
Destination:  
Individual In Charge:  
Mode of Transportation:

**Participant Information:**

Participant's Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_  
Parent/Guardian's Name \_\_\_\_\_  
Full Address: \_\_\_\_\_  
Home Phone: (    ) \_\_\_\_\_ Business Phone: (    ) \_\_\_\_\_

**Adult Shirt Size:**    \_\_\_ S    \_\_\_ M    \_\_\_ L    \_\_\_ XL    \_\_\_ 2X    \_\_\_ 3X

**Permission to Participate:**

I, \_\_\_\_\_, attest that I am the parent or legal guardian of this participant,  
*Parent or Guardian's Name*  
and I grant permission for my child, \_\_\_\_\_ to participate  
*Child's Name*  
in this parish youth ministry event, which requires transportation to a location away from the parish site. This activity will take place under the guidance and direction of Parish employees and/or volunteers from \_\_\_\_\_.  
*Parish Name*

**Hold Harmless Agreement:**

As parent/legal guardian, I agree to be legally responsible for any personal actions taken by my son/daughter named above. In the event of a serious violation of the rules of conduct, I understand that he/she may be sent home at my expense, but you will be notified and logistics discussed with you in advance.

I agree on behalf of myself, my son/daughter named herein, our heirs, successors and assigns to indemnify, hold harmless and defend \_\_\_\_\_,  
*Parish Name*

and the Diocese of Charleston, their officers, directors and agents (collectively, the "Diocesan Parties") from any liability for illness, injury or death arising from or in connection with my son/daughter attending the above named activity/event, except that such obligations shall not apply in the event of the gross negligence or intentional acts of the Diocesan Parties.

*Signature of Parent/Guardian:* \_\_\_\_\_ *Date:* \_\_\_\_\_

**Permission To Be Photographed:**

I give my permission for my child, \_\_\_\_\_, to be photographed at this event and understand that the photographs may be used for publicity, etc.    \_\_\_ Yes    \_\_\_ No  
*Signature of Parent/Guardian:* \_\_\_\_\_ *Date:* \_\_\_\_\_

**Side A**

## MEDICAL CONSENT AND PERMISSION TO TREAT

### Release of Information:

To the best of my knowledge, my child, \_\_\_\_\_ is in good health, and I assume all responsibility for the health of my child. In the event of an emergency, I give permission to transport my child to a hospital or emergency treatment facility. I wish to be advised prior to any further treatment by the medical professionals, but I do not want treatment to be withheld if neither I nor any emergency contact I have named below can be located and the injury is life-threatening or the failure to provide treatment is likely to result in permanent injury.

I hereby grant medical personnel permission to release medical information to the Diocesan Director and/or my parish youth minister in the event that my child becomes ill or injured.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### Insurance Information:

Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

### Emergency Contact Information:

Parent/Guardian's Name: \_\_\_\_\_

Full Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Business Phone ( ) \_\_\_\_\_

If you are unable to reach me, please contact:

Name: \_\_\_\_\_

Relationship to me or my son/daughter: \_\_\_\_\_

### Medical History:

My son/daughter is under the care of a medical provider. \_\_\_\_\_ Yes \_\_\_\_\_ No

Provider Name: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

My son/daughter is taking medication and will bring all medication with him/her and it will be clearly labeled. My son/daughter is taking the following medication(s) and directions for taking this medication, including dosage, frequency and storage are as follows:

I hereby grant permission for non-prescription medication (such as cough drops, cough syrup, Tylenol, etc.) To be given to my child if necessary. \_\_\_\_\_ Yes \_\_\_\_\_ No

My son/daughter is allergic to the following: \_\_\_\_\_

My son/daughter's immunizations are current and up to date \_\_\_\_\_ Yes \_\_\_\_\_ No

My son/daughter has the following limitations: \_\_\_\_\_

My son/daughter experiences homesickness, emotional reactions to new situations, sleepwalking, fainting, bedwetting, etc. \_\_\_\_\_ Yes \_\_\_\_\_ No

Please explain: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Side B



**DIOCESE OF CHARLESTON  
ADULT RELEASE FORM**

**PARTICIPANT INFORMATION:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Day Phone : \_\_\_\_\_ Eve Phone : \_\_\_\_\_  
Parish/School & City: \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**PHYSICIAN & HEALTH INSURANCE INFORMATION:**

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_  
Family Health Insurance Co. \_\_\_\_\_  
Policy No. (Individual) \_\_\_\_\_ (Group) \_\_\_\_\_  
Please list any medication that you may have an allergy to and/or any health problems a  
Physician would need to know in treating you. \_\_\_\_\_  
\_\_\_\_\_

**MEDICAL AUTHORIZATION & RELEASE OF INFORMATION**

In the event of injury or illness I hereby give my permission to Jerry White, Director of Youth Ministry, employee of the Diocese of Charleston, to authorize transportation for me to a medical facility for any necessary medical treatment. I agree that in case of injury I will apply my hospitalization and/or accident insurance toward the payment of the expenses incurred. I give my permission to medical personnel to share information with my parish youth minister or Jerry White, Director of Youth Ministry, in the event of injury or illness.  
Signature Required: \_\_\_\_\_

**RELEASE AND INDEMNIFICATION**

I hereby release the Diocese of Charleston, their agents, successors, legal representatives and its employees from any liability for any injury to myself as a result of my participation in the Diocesan event, and I agree to indemnify and save the Diocese harmless for any costs or expenses it may incur as a result of my participation.  
Signature Required: \_\_\_\_\_

**CODE OF BEHAVIOR**

Participation in the Conference is a privilege and not a right. Each adult must attend all scheduled activities. The behavior of all (youth & adults) must reflect Christian values. The Sponsoring Adult must stay at the entire event and is responsible at all time for his/her youth. Each parish, through the sponsoring adult, will take full responsibility for any damage done by their group. Drugs/Alcohol are not permitted. The Diocesan staff reserves the right to ask any participant to leave at the participant's own expense. I have read and agree to uphold the above "Code of Behavior".  
Signature Required: \_\_\_\_\_

**DIOCESE OF CHARLESTON OFFICE OF YOUTH/YOUNG ADULT MINISTRY**

It is the policy of the Office of Youth Ministry of the Diocese of Charleston to require a signed affidavit, from ALL ADULT CHAPERONES at overnight activities, testifying that they have never been charged with or convicted of sexual abuse. This is for the protection of our youth as well as you the adult.  
I, \_\_\_\_\_ chaperone for \_\_\_\_\_ parish,  
have never been the subject of an investigation involving an allegation of sexual abuse.  
Signature Required: \_\_\_\_\_

# Accident Insurance Roster

*(Please Print Legibly)*

August 1, 2019-July 31, 2020

The cost is **\$6.25** per student.

Parish \_\_\_\_\_ City \_\_\_\_\_

Contact name \_\_\_\_\_ Phone \_\_\_\_\_

Name of Youth \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_ Phone \_\_\_\_\_

Name of Youth \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_ Phone \_\_\_\_\_

Name of Youth \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_ Phone \_\_\_\_\_

Name of Youth \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_ Phone \_\_\_\_\_

## *Rally Guidelines*



We ask that the rules listed below be reviewed and explained to your youth by the chaperoning adults:

- A. No alcohol, drugs, tobacco, and/or weapons may be brought or used in accordance with the laws of the State of South Carolina and diocesan policies and guidelines. Anyone disregarding the law will be subject to immediate dismissal.
- B. Each person is to respect themselves, as well as the others in attendance.
- C. Adult to youth ratio is 6:1. If both male and female will be at the event, there must also be male and female leaders.
- D. Adults must sit with their youth.
- E. All youth must participate in all activities.
- F. During the keynote presentation and liturgy, please ensure that your youth are not wandering around or going to the restroom in large numbers.
- G. Nametags are to be worn at all times during the Rally.
- H. Clean up your area when you are done with lunch!

Date: \_\_\_\_\_

The Most Reverend Robert E. Guglielmone  
Bishop of Charleston  
Diocese of Charleston  
901 Orange Grove Road  
Charleston, SC 29407

RE: Chaperones for Junior High Rally 2019

Dear Bishop Guglielmone:

Our parish youth will be participating in the Junior High Rally to be held at White Oak Conference Center on **November 2, 2019**.

All chaperones attending from our parish have satisfied the SAFE HAVEN requirement under the policy of the USCCB Charter for the Protection of Children and Youth.

Sincerely yours in Christ,

Signature of Pastor or Parish Administrator: \_\_\_\_\_

Parish Name and City: \_\_\_\_\_

Please return to the Diocese of Charleston, Office of Youth and Young Adult Ministry,  
901 Orange Grove Road, Charleston, SC 29407 no later than the registration deadline of  
**October 18, 2019.**