

Chaperone Code of Conduct

As an adult chaperone, I will conduct myself in a manner that exhibits the highest Christian ethical standards and avoids even the appearance of impropriety, and therefore I will:

1. Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity and consideration
2. Report suspected abuse of any minor to the appropriate authorities
3. Be aware of and adhere to emergency plans and evacuation routes
4. Uphold the authority of those responsible for the Conference and assist them in every way possible
5. Avoid situations where I am alone with minors, always following the two adult rule
6. Avoid any form of excessive familiarity, inappropriate language, or any situation or conduct that exploits or could give the appearance of exploiting another

I have attended a VIRTUS training class, signed the proper forms, and registered online. _____ (*initial*)

I will not:

1. Use physical affection to initiate inappropriate contact with minors
2. Use, possess, or be under the influence of alcohol or illegal substances at any time during this event
3. Purchase alcohol or illegal substances for or to distribute to anyone
4. Smoke or use tobacco products in the presence of minors
5. Purchase tobacco products for or to distribute to anyone
6. Bring any weapons (including "concealed carry" weapons) to the Conference
7. Humiliate, ridicule, threaten, demean, or degrade minors or others, nor tolerate such behavior in the environment for which I am responsible
8. Use physical discipline in any way for behavior management of minors
9. Use profanity in any form in the presence of minors

I understand that my failure to agree to and abide by the Chaperone Code of Conduct will bar me from participation in the Diocesan Catholic Youth Conference.

Signature

Print name here

Email address

Chaperone responsibilities on reverse side of this page.

A copy of this CODE of CONDUCT must be read and signed by EACH ADULT PARTICIPANT

and must be received by the Office of Faith Formation no later than

February 8, 2019

OFFICE OF FAITH FORMATION
CATHOLIC DIOCESE OF WICHITA
Medical Release and Waiver

PLEASE PRINT LEGIBLY IN INK:

Name of Participant _____ Date of Birth ____/____/____

Address _____ City _____ State _____ Zip _____

Phone # (____) _____ M F Height _____ Weight _____ Age _____

Emergency Contact # 1 Name: _____ Relationship to participant _____

Address (if different from participant) _____

Contact Home or Cell Phone _____ Contact Work Phone _____

Emergency Contact # 2 Name: _____ Relationship to participant _____

Contact Home or Cell Phone _____ Contact Work Phone _____

Insurance Company _____ Policy # _____

List any Allergies/ Present medical conditions/ Activity restrictions:

**We will attempt to accommodate gluten free requests,
but cannot accommodate other dietary restrictions.**

List current medications and dosage: _____

Does Participant wear contact lenses? Yes ___ No ___

Medical Authorization:

I/We understand that the Catholic Diocese of Wichita and the Office of Faith Formation assume no responsibility for accidents which may occur in association with diocesan events and activities. I/We agree to use my/our personal insurance to cover any such incidents. I/We understand that, in the event medical intervention is needed, every attempt will be made to contact the persons listed above. In the event those individuals cannot be reached, I/We hereby give permission to the physician or any other qualified medical staff selected by the event leader to hospitalize, secure medical treatment, and/or order injection, anesthesia or surgery for Participant as deemed necessary.

Permission for Other Medical Matters:

___ YES, in the event it comes to the attention of the diocesan and/or parish chaperones that my child complains of illness, I grant permission for non-prescription medication (such as Tylenol, lozenges, etc.) to be given to Participant.

Waiver:

I understand all reasonable safety precautions will be taken at all times by the Catholic Diocese of Wichita and the Office of Faith Formation and its agents during the events and activities. I understand the possibility of unforeseen hazards and know the inherent possibility of risk. I agree to indemnify and hold harmless the Catholic Diocese of Wichita and/or the Office of Faith Formation, its leaders, employees and volunteer staff from any claim arising from or in connection with attending this event.

Code of Behavior:

I agree to abide by and/or instruct Participant to abide by all rules and regulations as outlined by the aforementioned chaperones/representatives. I agree that if I/Participant fail(s) to abide in any way by the rules, that I/Participant can be dismissed from the trip/event and sent home immediately at my/Participant's expense with no right of reimbursement or refund for any amount in connection therewith from the Catholic Diocese of Wichita or its chaperones/representatives.

Photo Release:

I hereby authorize the Catholic Diocese of Wichita, and its agents to utilize photographic and/or video images of me or my child by the Catholic Diocese of Wichita. In giving my consent, I hereby indemnify and hold harmless the Catholic Diocese of Wichita and its agents from any and all responsibility or liability. I understand that I will receive no compensation,

Diocesan Catholic Youth Conference

CHAPERONE RESPONSIBILITIES

As an adult chaperone, you set an example for the young people who are participating in the Diocesan Catholic Youth Conference. All chaperones must be in compliance with the diocesan policy on Safe Environments including VIRTUS training. All chaperones must be 21 years of age or older.

There must be a minimum of:

two chaperones for the first 1 to 12 youth and
one chaperone for every additional 1 to 10 youth in attendance.

As an adult chaperone, I am responsible for, but not limited to the following:

1. Being fully accountable for the youth under my care, and fully aware of their whereabouts
2. Communicating and enforcing the Youth Code of Conduct, including Dress Code
3. Checking rooms at curfew to make certain all youth are in assigned rooms
4. Assisting the Conference staff in monitoring hotel hallways at night
5. Familiarizing myself with the location of medical aid
6. Being aware of and adhering to emergency plans and evacuation procedures established for the group
7. Dealing directly and immediately with any disciplinary action needed
8. Notifying the Conference Staff of any concerns/disciplinary actions that may arise during this event

HALLWAY SIGN UP FOR CHAPERONES

- Two adult chaperones will be assigned to each hotel floor for 30-minute shifts from 11:30 p.m. to 1:30 a.m.
- Adult chaperones will be asked to sign up for these shifts upon arrival at the Conference on Saturday morning
- Hallway patrolling helps remind the participants to be quiet and keep curfew on the floors

Chaperone Code of Conduct on reverse side of this page.