

## FAMILY AND YOUTH CONFERENCE 2019 <u>REGISTRATION FORM</u>

Wed, July 17th<sup>th</sup> - Saturday, July 20<sup>th</sup>





## Let us rise up and Rebuild

| FIRST NAME:(Rev. Dn. Dr.  | Mr. Mrs. Ms.)                         | MI        | LAST NAME                        | Adult: XS<br>Child: 2T 3                    | SIZE (CIRCLE) S M L XL XXL ST 4T 5T 6T 6/8 10/12 14/16  | AGE       | GENDER  M / F                    | COST |
|---|---------------------------------------|-----------|----------------------------------|---|---|-----------|----------------------------------|------|
| FIRST NAME:(Rev. Dn. Dr. Mr. Mrs. Ms.) MI   |                                       | MI        | LAST NAME                        | T-SHIRT<br>Adult: XS<br>Child: 2T 3         | T-SHIRT SIZE (CIRCLE) Adult: XS S M L XL XXL Child: 2T 3T 4T 5T 6T Youth: 2/4 6/8 10/12 14/16 |           | GENDER<br>M / F                  | COST |
| FIRST NAME:(Rev. Dn. Dr. Mr. Mrs. Ms.) MI   |                                       | MI        | LAST NAME                        | Adult: XS<br>Child: 2T 3                    | T-SHIRT SIZE (CIRCLE) Adult: XS S M L XL XXL Child: 2T 3T 4T 5T 6T Youth: 2/4 6/8 10/12 14/16 |           | GENDER M / F                     | COST |
| FIRST NAME:(Rev. Dn. Dr. Mr. Mrs. Ms.)  |                                       | MI        | LAST NAME                        | Adult: XS<br>Child: 2T 3                    | T-SHIRT SIZE (CIRCLE) Adult: XS S M L XL XXL Child: 2T 3T 4T 5T 6T Youth: 2/4 6/8 10/12 14/16 |           | GENDER M / F                     | COST |
| FIRST NAME:(Rev. Dn. Dr. Mr. Mrs. Ms.)  |                                       | MI        | LAST NAME                        | Adult: XS<br>Child: 2T 3                    | T-SHIRT SIZE (CIRCLE) Adult: XS S M L XL XXL Child: 2T 3T 4T 5T 6T Youth: 2/4 6/8 10/12 14/16 |           | GENDER M / F                     | COST |
|   |                                       |           |                                  |   |   |           | Subtotal:                        |      |
| ** Discount for Hotel Pricing Only**  |                                       |           | Only**                           | Discount: Number of X 150 Children age 4-12 |   | X 150     | Discount total:                  |      |
|   |                                       |           |                                  |   |   |           | Total<br>Cost:                   |      |
| STREET ADDRESS  |                                       |           | EMAIL ADDRESS                    |   | Special Notes (Foo  | d or Alle |                                  |      |
| CITY  | STATE                                 |           | ZIP CODE                         | HOME PHONE # CELL P                         |   | L PHONE # |                                  |      |
| For emergency contact: NAME:  | PHONE # RELATIONSHIP                  |           | PARISH NAME & LOCATION           |   |   | VICAR     |                                  |      |
| Are you Flying in?  | Airport                               |           | Flight Number Incoming           |   | Flight Number Outgoing  |           | Do you need a ride?              |      |
| <ul><li>Yes</li><li>No</li></ul>  | <ul><li>○ ORD</li><li>○ MDW</li></ul> |           |                                  |   |   |           | <ul><li>Yes</li><li>No</li></ul> |      |
| Would you like to come of   |                                       | stay late | er at the Hilton                 | o Yes                                       |   |           |                                  |      |
| Chicago/Oakbrook Suite? Are you interested in a Downtown Tour?  |                                       |           | <ul><li>No</li><li>Yes</li></ul> |   |   |           |                                  |      |
| apparis province and a second |                                       |           |                                  | o No  | 10. 11.1  |           |                                  |      |

SPECIAL REQUESTS: (Dietary Restrictions, Allergy Info, etc. Please note here if individuals registered on this form from a different church/parish are rooming with you. Note their names and the parish they attend above):

#### Family & Youth Conference Registration Fees

Refer to RULES and REGULATIONS (page 2) for additional detail. Fees are Non-Refundable!

(Cost includes 9 Meals/Lodging/Activities for 4 days/3 Nights)

1 PERSON OCCUPANCY: \$700 CHILD 4-12: Deduct \$150/Child 2 PERSON OCCUPANCY: \$500/person CHILD 3 AND UNDER: FREE

3 PERSON OCCUPANCY: \$400/person

4 PERSON OCCUPANCY: \$300/person 5 PERSON OCCUPANCY: \$275/person

(\$300 Deposit Must be Paid with Registration & Remaining Balance must be Paid according to the payment plan )

Day Scholars: Adult \$225 /Per Person Child (4-12) - \$150 Per Child Kids 3 and Under Free (\$100/person Deposit Must be Paid with Registration & Remaining Balance must be Paid according to the Payment Plan)

## **FOR OFFICE USE ONLY:**

| Waiver: I, as an attendee/participant of the Family and Youth Conference 2019, acknowledge and accept the responsibility of safety, liability and medical insurance for myself and those registering on this form in case of any emergency and will not hold the Office Bearers, Coordinators, or participants of the Family and Youth Conference responsible. In case of an emergency, I give my permission for emergency medical treatment. I take full responsibility to abide by the rules and regulations of the Family and Youth Conference and Drury Lane Conference center. I, hereby, agree to follow those rules and regulations set by the above-mentioned organizations, and am aware that any failure to do so, may result in my dismissal from the conference, and if necessary, appropriate legal action may be taken against me. I am aware that it is my responsibility to attend the sessions as scheduled and to maintain the Christian atmosphere of the conference. |         |             |                                  |       |      |           |  |  |
|--|---------|-------------|----------------------------------|-------|------|-----------|--|--|
| Primary Registrant Signature   |         | Date        | Parent's Signature (if under 18) |       |      | Date      |  |  |
| Date Received  | CHECK # | CASH AMOUNT | BALANCE                          | GROUP | ROOM | TOTAL DUE |  |  |
|  |         |             |                                  |       |      |           |  |  |
|  |         |             |                                  |       |      |           |  |  |

# **Payment Grid**

| Person (Age 4 and above)   | Per Person<br>Standard<br>Registration<br>+ Hotel<br>Cost | Total<br>Registration<br>Cost | Person            | Per Person Standard Registration NO HOTEL | Total Registration<br>Cost |
|----------------------------|---|-------------------------------|-------------------|---|----------------------------|
| 1 Person                   | \$700   | \$700                         | 1 Adult           | \$225                                     | \$225                      |
| 2 Person                   | \$500   | \$1000                        | 2 Adult           | \$225                                     | \$450                      |
| 3 Person                   | \$400   | \$1200                        | 3 Adult           | \$225                                     | \$675                      |
| 4 Person                   | \$300   | \$1200                        | 4 Adult           | \$225                                     | \$900                      |
| 5 Person                   | \$275   | \$1375                        | 5 Adult           | \$225                                     | \$1125                     |
| Child 3 and under          | Free  | Free                          | Child 4 to 12     | \$150/Child                               |                            |
| Discount for Child 4 to 12 | \$150/child   |                               | Child 3 and Under | Free                                      | Free                       |

#### REGISTRATION/CONFERENCE GUIDELINES

- 1. Early Registration will open on Monday, February 10th, 2019. Last day of registration will be Sunday, April 28, 2019. After April 28th if space is available, registration rates will increase by \$100 per person until May 26th, 2019.
- 2. All necessary information should be provided on the registration form.
- 3. At minimum non-refundable initial payment should be paid with the Registration Form. Remaining balances will be collected in two other installments.
- 4. Check in time will begin at 3pm on July 17th and check out time will be 12pm on July 20th. If you arrive early, you will need to wait until the registration counter opens. If you check out late, late fees are the responsibility of the Participant.
- 5. If you decide to stay at the hotel outside of the conference dates, you will be responsible to make the appropriate arrangements and pay the appropriate Hotel fees.
- 6. NO ROOM CHANGES will be made after the room is assigned.
- 7. Rooms will be assigned on a first come, first served basis.
- 8. Registration is NON Transferrable.
- 9. Special requests or needs (dietary, allergy, disability etc.) must be stated in the space provided on this form. The conference committee will try their best to accommodate your special needs.
- 10. Unmarried persons are not permitted to be in each other's rooms without parental supervision.
- 11. Conference will be held at Drury Lane Conference Center & Hilton Chicago/Oakbrook Suites 100 Drury Ln, Oakbrook Terrace, IL 60181
- 12. The nearest Airports are O'Hare International Airport (ORD) and Chicago Midway International Airport (MDW).
- 13. For more information regarding Transportation go to <a href="http://www.fyc.ds-wa.org">http://www.fyc.ds-wa.org</a>
- 14. Conference registration and accommodation fees are non-refundable. Fees will not be reduced/refunded for partial attendance or missed meals.
- 15. The Conference Conveners and Directors may ask a participant to leave the conference if he or she violates any of the rules mentioned herein, as well as those delivered in writing or as general announcements during the conference. Any questions, comments or concerns should be brought to the attention of the Conference Conveners and Directors or any other members of the Conference Committee.
- 16. Any questions, comments or concerns should be brought to the attention of your parish coordinator or area coordinator.
- 17. Please keep the following in mind while registering for housing options

#### Occupancy is determined by counting the number of individuals in the room age 4 and above

- 1. One Person Occupancy 1 King Bed with pull out sofa
- 2. Two Person Occupancy 1 King Bed with pull out sofa
- 3. Three Person Occupancy 1 King Bed with Pull out sofa
- 4. Four Person Occupancy 1 King Bed with Pull out sofa or 2 Queen Beds with Pull out sofa
- 5. Five Person Occupancy 2 Queen Beds with Pull out sofa

If you are a single registrant and would like to take advantage of the double, triple, quad rate, the committee REQURIES for you to identify your roommates and note it separately in your registration form under the SPECIAL REQUEST section. If you choose not to do so, then the committee has the right to assign participants to room with you, which may not be your first choice, and if we are unable to find persons to room with you per your request, you will be required to pay at the higher room rate.

### **RULES & REGULATIONS**

## Please read and sign above. Your signature indicates that you understand and acknowledge to the following:

- 1. I agree that neither I nor anyone registering on this form will bring any alcoholic or illegal substances onto the conference site. If participants are found with such items, appropriate action (including contacting parents of minors, vicar, and police) will be taken by the Conference Committee.
- 2. I understand that by signing this form, I am consenting that the images and video recordings of myself and my family members taken during the conference will be the property of the Diocese of South-West America of the Malankara Orthodox Syrian Church. I agree that these images and videos may be used by the Diocese of South-West America for a variety of purposes without further notification.
- 3. I understand that I alone am financially and legally liable for any damage done to the facilities and/or properties at the conference site by myself and/or those registering on this form.
- 4. I acknowledge and accept the responsibility for the safety, liability and medical insurance for myself, my family and those registering on this form.
- 5. I understand that parents and guardians are responsible for minors (Age 17 or under). If the primary participant is aged 17 or under, he/she must have a guardian (18+) present at the conference and/or staying with him/her in the hotel room, and this must be noted in the Special Requests section if the guardian is not the parent of the minor.
- 6. I understand that any and all valuables brought to the conference facility by a participant are his/her sole responsibility. The Family Conference Committee & Diocese of South-West American will not be held responsible or provide any reimbursement for any lost items.
- All participants should dress respectfully and conduct themselves in a manner appropriate for a religious function. Participants should be respectful towards each other. Any form of physical aggression towards any individual is strictly prohibited.

### **Additional Notes:**

**Registration period: 02/10/19 - 4/28/19** 

### **PAYMENT PLAN DEADLINES**

Immediately: Initial Deposit Due
May 19<sup>th</sup>: Half of remaining Balance Due
June 30<sup>th</sup>: Full Balance Due