

Temple Sinai Youth Group Membership Form 2009-2010

All Youth Group participants must have a completed membership form!

Please fill out one form for each child. Please check the appropriate Youth Group below.

_____ **JOOSY (6th-8th grade) (\$25)** _____ **SAFETY (9th-12th grade) (\$60)**

Please remember that membership is required to attend NFTY-STR regional events. (Your membership fee includes NFTY dues, as well). Non-temple members add \$50 to membership fee.

All membership forms and payments received by 8/25/09 will permit member to attend 8/30/09 kick off event for FREE.

Youth Group Member's Name:

Sex: M ___ F ___

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell Phone: _____

Child's Email

Address: _____

Best way to reach child: _____

Latest time to call: _____ Date of Birth: _____

Name of School: _____ Grade (as of Aug. 09): _____

Names of friends at Temple Sinai:

First Parent/Guardian's

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home telephone: _____ Cell: _____

Email: _____

_____ **Yes! I would like to volunteer to chaperone Youth Group events.**

_____ **Yes! I am interested in serving on the Youth Advisory Committee.**

Other Parent/Guardian's

Name: _____

Address: _____

City: _____ State: _____

Zip: _____

Home Telephone: _____ Cell:: _____

Email: _____

_____ **Yes! I would like to volunteer to chaperone Youth Group events**

_____ **Yes! I am interested in serving on the Youth Advisory Committee.**

Temple Sinai Youth Department
Brit Chevre
Code of Conduct

- I will promote a religious youth community based on mutual respect and a sense of personal well being.
- I will respect those around me. Foul language and/or abuse of any kind will not be tolerated.
- I will not possess, consume, or distribute alcoholic beverages, other than served by the adult leadership for religious purposes.
- I will not possess, consume, or distribute any illegal drug or drug paraphernalia.
- I will not possess, use or distribute any tobacco products.
- I will not bring or use any weapons or firearms.
- I will not commit any illegal act. I understand that vandalism, disturbing the peace, or other inappropriate behavior as determined by the adult leadership will not be tolerated. I understand that I will have to pay for any damage I cause.
- I understand that no gambling is allowed, except for events that have been approved by the adult leadership.
- I will not drive during any event, unless the adult leadership has given advanced permission. All driving requests must be in writing with the parent/guardian signature.
- I will abide by the event curfew announced by the leadership.
- I understand that no unauthorized guests are allowed at any event. Any unauthorized guests will be asked to leave immediately.
- I agree to refrain from inappropriate sexual behavior. Any touching or behavior that is more than that of friendship affection will not be tolerated.
- I will attend and participate fully in the entire event unless otherwise agreed upon by the adult leadership. I will arrive on time, stay for the duration of the event, and remain on event premises at all times.
- I agree to abide by any additional rules, which may be announced before or during an event.

1st Offense: Verbal Warning

2nd Offense: Parent(s) Meeting

3rd Offense: Suspension (1 month or 4 events)

4th Offense: Expulsion

Any serious misbehavior dealing with alcohol, drugs or endangerment of others will result in an immediate expulsion.

I understand the consequences of the failure to follow any rules as listed in the *Brit Chevre*.

By signing below, I agree to the following:

1. We have reviewed and discussed the Temple Sinai Youth Activities Brit Chevre (code of conduct).
2. My child agrees to and understands the Temple Sinai Youth Activities Brit Chevre.
3. I (we) do not hold Temple Sinai and/or any of its agents responsible in case of any emergency situation which may arise.

Parent/Guardian Signature: _____ Print:

Participant Signature: _____ Print:

TO BE COMPLETED BY PARENT OR GUARDIAN

Youth Group Member's Name:

Please list any allergies (food and medication): _____

Does your child have any medical conditions of which the advisors should be aware?

In case of emergency, if parents cannot be reached, please contact:

Name: _____ Relationship to child: _____

Home Phone: _____ Cell Phone: _____

MEDICAL INSURANCE INFORMATION

Insurance Carrier:

Policy ID & Group Number:

MEDICAL PERMISSION/ RELEASE FORM

I hereby grant permission for my son/daughter _____ to attend Temple Sinai Youth Group events. In case of a medical emergency, I understand that every effort will be made to contact parent(s), guardian(s), or emergency contact. In the event I cannot be reached, I hereby give permission to the physician selected by the persons in charge to hospitalize, secure proper treatment for, and to order an injection, anesthesia or surgery for my child named above.

This form may be photocopied for emergency use outside of Temple Sinai.

Signature of Parent or Guardian _____ Date _____

Youth Group Permission/ Release

___ I give Temple Sinai my permission to use pictures of my child at youth group events in Temple Sinai publicity and communication. (If not checked your child's picture will not be featured in any Temple Sinai publications.)

___ I give my child permission to attend and participate in Temple Sinai Youth activities. Neither Temple Sinai nor its staff or volunteers shall be liable or responsible for any injury or loss suffered by or to any participant while attending or engaged in activities or in transit to or from an activity.

Signature of Parent or Guardian _____ Date _____

Please make checks payable to "Temple Sinai" and send to:

Temple Sinai
Attn: Andrea Eiffert, Youth Director
4631 S, Lockwood Ridge Rd.
Sarasota, FL 34231