

**Sacred Heart Parish, Youth Ministry**  
**CARDBOARD CITY 2018**

**When:** Friday, May 11<sup>th</sup> starting at 5 p.m. – Saturday, May 12<sup>th</sup> at 10 a.m.

**Where:** Grounds of Sacred Heart Parish, 310 Spring Ave., Troy NY 12180

**Security:** Overnight security will be provided. Participants are not allowed to leave the premises. Only registered participants and designated volunteers are permitted on premises. Local law enforcement will be notified of the event. All access to outdoor sleeping areas will be secured by overnight security.

**Meals:** A simple meal similar to what is served in a shelter will be provided, with some snacks throughout the event.

**What you will sleep in:** That is up to you! Bring a large cardboard box to decorate. We will be judging them and awarding prizes. Please be sure to bring a warm sleeping bag or blankets and pillow. A ground tarp might be useful. Also, please bring a flashlight.

**Activities:** Box decorating competitions. You must bring all of your materials including your box. Games, Movie, Testimonial Talks, Holy Hour

**Registration:** Each participant needs to fill out a Registration Form, the “Hold Harmless”, (if applicable) the “Minor Waiver” and the “Photo Release” forms by May 1<sup>st</sup>, 2018. Extras will be available upon request. The cost of the event is \$15 per participant.

**Fundraising:** Raise the “rent” and help us “box up homelessness and send it packing” by collecting pledges, or making donations to Joseph’s House. We ask each Cardboard City “resident” to have a goal to raise \$100 or more. See the “Fundraising Form” for more information

**Volunteers:** Youth groups require one adult for every 7 youth ages 11-18 in attendance. Volunteers must be Virtus trained and have a background check

**Weather:** In the event of extreme weather, we will move into the gym and the Cafeteria of Sacred Heart.

**What NOT to Bring:** No valuables, pets, tobacco, alcohol, weapons, electronics or power tools.

# Please Help Me Raise My Rent for Cardboard City!

May 11<sup>th</sup> & 12th, 2018

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

Church: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

Cardboard City is a fundraiser for the programs for Joseph's House in downtown Troy, whose mission is to help the homeless become self-sufficient. My goal is to raise \$100 or more for local homeless by spending one night in a cardboard box at Sacred Heart Parish in Troy.

Sponsors: Make checks payable to Joseph's House. Provide your mailing address below to receive a receipt for your tax deductible contribution. (Tax ID #)

Participants: Please give this form to Matt Ingold, along with the checks you have collected by May 1st. The mailing address is Sacred Heart Parish, 310 Spring Ave. Troy, NY 12180

**Yes! I will help raise money for Troy's homeless population!**

I \_\_\_\_\_ only need five \$20 sponsors to reach my goal!

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Amount: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Amount: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Amount: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Amount: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Amount: \_\_\_\_\_

Sacred Heart Parish, Youth Ministry

PARENT/GUARDIAN WAIVER & RELEASE FOR MINOR PARTICIPATION

Cardboard City-May 11<sup>th</sup> and 12th, 2018

Please print in ink:

Minor's Name (last, first, middle)

\_\_\_\_\_ Age: \_\_\_\_\_

Birthdate: \_\_\_ / \_\_\_ / \_\_\_ Male \_\_\_ Female \_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Home: (

Emergency Contact: \_\_\_\_\_ Home: (

Medical Insurance Company: \_\_\_\_\_

Policy #: \_\_\_\_\_

Does your child have allergies to:

\_\_\_\_\_ Pollens \_\_\_\_\_ Medications \_\_\_\_\_ Food \_\_\_\_\_ Insect Bites (if yes to any please specify)

Does your child suffer from or has ever experienced, or is being treated currently for any of the following:

\_\_\_\_\_ Asthma \_\_\_\_\_ Diabetes \_\_\_\_\_ Heart Trouble \_\_\_\_\_ Epilepsy/Seizure/Disorder Date of last tetanus shot

\_\_\_\_\_/\_\_\_\_\_

The undersigned \_\_\_\_\_ (name of parent/guardian), the parent and natural or legal guardian of the above minor hereby represents that he or she is, in fact, acting as such capacity and AGREES TO DEFEND, HOLD HARMLESS, AND INDEMNIFY SACRED HEART CATHOLIC CHURCH OF TROY, AND ANY OF ITS OFFICERS, DIRECTORS, TRUSTEES, AGENTS SERVANTS OR EMPLOYEES FROM ALL LIABILITY, LOSS OR HARM THAT MAY OCCUR BY REASON OF THE MINOR'S PARTICIPATION IN THE CARDBOARD CITY EVENT. BY MY SIGNATURE BELOW, I ACKNOWLEDGE AND AGREE TO THE ABOVE WAIVER AND RELEASE AND TO PERMISSION FOR MEDICAL ATTENTION SET FORTH BELOW.

Photos and video will be taken at Cardboard City. Please sign here if you do NOT want any photos/video of your child to be used for event awareness purposes: \_\_\_\_\_

I further give Sacred Heart Church permission to seek whatever medical attention is deemed necessary, and release Sacred Heart Church of any liability against personal losses of the above minor. In the event the above minor is injured and requires the attention of a doctor. I consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is required for a physician and/or hospital personnel designated by Sacred Heart Church, I agree to hold such person free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I also acknowledge that I will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider. Further, I affirm that the health insurance information provided above is accurate at this date and will, to the best of my knowledge, still be in force for the above minor.

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

HOLD HARMLESS AND ASSUMPTION OF THE RISK AGREEMENT FOR PARTICIPATION IN THE SACRED HEART PARISH, YOUTH MINISTRY CARDBOARD CITY EVENT

For and in consideration of Sacred Heart Parish of Troy, allowing me to participate in the Cardboard City event on May 11<sup>th</sup> and 12<sup>th</sup> 2018, I hereby voluntarily release, discharge, waive and relinquish any and all actions or causes of action for personal injury, property damage or wrongful death against Sacred Heart Parish of Troy, or any of its officers, directors, trustees, agents, servants, or employees, and the right to present any claim whether the same shall arise by the negligence of any said persons, or otherwise, occurring to me as a result of my participation in the Cardboard City event and any activities incidental thereto wherever or however the same may occur and for the whatever period said activities may continue.

IT IS MY INTENTION BY SIGNING THIS INSTRUMENT, TO EXEMPT AND RELIEVE SACRED HEART PARISH OF TROY AND ITS OFFICERS, DIRECTORS, TRUSTEES, AGENTS, SERVANTS, OR EMPLOYEES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE, WRONGFUL DEATH OR ANY AND ALL LIABILITY. I am fully aware of the risks and hazards inherent in the Cardboard City event and I hereby elect voluntarily to assume all risks of loss, damage, or injury that may be sustained by me during such event. I understand that this hold harmless and assumption of the risk agreement shall apply not only to me but also to my heirs, executors, administrators, next of kin, assigns and successors.

I ACKNOWLEDGE THAT I HAVE READ THE FORGOING AND HAVE BEEN FULLY AND COMPLETELY ADVISED OF THE POTENTIAL DANGERS INCIDENTAL TO THE CARDBOARD CITY EVENT AND I AM FULLY AWARE OF THE LEGAL CONSEQUENCES OF SIGNING THIS INSTRUMENT.

\_\_\_\_ By my signature below, I hereby certify that I am eighteen (18) years of age or older.

\_\_\_\_ I am under the age of eighteen (18) years. My parent/guardian has read this form with me and completed the additional parent/guardian Waiver and Release.

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

Participant Signature Print Name

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

Parent Signature Print Name

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Alt Phone: \_\_\_\_\_