A Common Youth Initiative
Immerse Yourself in Justice

The Common Place and Broad Street Ministry Collaboration

Hannah Johnson
ACYI@thecommonplacephilly.org
267-275-8238 ex. 305

Azsherai Gary
azsherai@broadstreetministry.org
215-735-4847 ex. 127
# Table of Contents

- What Is A Common Youth Initiative? 2
- Summer 2020 3
- What to Expect with A Common Youth Initiative 4
- Packing List 6
- A Note About Solidarity & Relational Engagement 7
- Summer 2020 A Common Youth Initiative 8
- Fees and Registration Information 10
- Frequently Asked Questions 11
  - What are adult leaders responsible for? 11
  - What if someone in our group has a dietary restriction? 11
  - Do we need vehicles? 11
  - Will we be safe? 12
  - May we bring any donations? 12
  - What are the appropriate age groups for a common youth initiative? 12
  - What is the weather going to be like? 12
  - Where will we be working? 12
- YOUTH Medical History/Release Form 15
- ADULT Medical History/Release Form 20
- Participant Roster 24
What is A Common Youth Initiative?

Founded in 2019, A Common Youth Initiative (ACYI) is the collaboration of two Philadelphia nonprofits—Broad Street Ministry and The Common Place. Broad Street Ministry (BSM) is a nonprofit organization that extends radical hospitality to all. The services and activities they provide are designed to build trust, foster community, and alleviate the suffering of our neighbors facing homelessness, hunger, and deep poverty. The Common Place (TCP) is a nonprofit that serves children and their families in Southwest Philadelphia through educational programs, social services, and collaborating with others. TCP and BSM have been running summer service-learning programs for high school and middle school aged students for a combined 10 years.

A Common Youth Initiative immerses youth and adult leaders from around the country into the diverse neighborhoods and communities of Philadelphia. Participants engage in service work throughout the city—identifying and confronting stereotypes that exist in society around urban poverty and marginalized communities. A variety of work sites create a rich introduction to Philadelphia and offer context to the intersections of food and housing insecurity, gender identity, incarceration, race, mental illness, and addiction.

Through daily dialogue at work sites, small discussion groups, and worship, participants develop a rich theological, social, and academic understandings of justice while recognizing ways in which Holy Scripture calls for justice and love for all—fostering conversations focused on topics such as lifelong service and discipleship.
Our theme for Summer 2020 is Immerse Yourself in Justice. On May 10th, 1967 Martin Luther King Jr. spoke with a secret club of Black and White Atlanta politicians fighting for the civil rights movement. In his speech, King warned against the “evils” of racism, poverty and the Vietnam War—saying that these triplets of evil would prevent equality for all people. This summer we will take a deep dive into the evils of racism, poverty and mass incarceration—and what that looks like over 50 years later.
What to Expect in a Week With A Common Youth Initiative

Arrival
All groups arrive at The Common Place on Sunday between 1:00 and 2:00 PM. Upon arrival, ACYI staff will greet you and show you where you can settle in for your week. After a very brief orientation, we will travel across the city to Broad Street Ministry. At 4:00pm, groups attend a Sunday worship service with the Broad Street Ministry faith community followed by dinner. After dinner, staff will lead everyone back to TCP for a more extensive orientation, give an overview of the week ahead, share strategies for staying safe, happy, and healthy, and answer any questions the groups may have. At 8:00 PM we will watch a movie to kick off discussions for tomorrow.

Daily Schedule
ACYI works with a variety of groups, and people to make your week as productive and educational as possible. That being said, the more people you work with the more flexible we have to be. Your schedule could change at any time and being flexible is incredibly important.

7:15am  **Wake Up:** You will be sleeping on cots in the renovated basement at The Common Place! Males and females will be separated.

7:45am  **Morning Devotion:** An ACYI staff member will be ready in the sanctuary to lead a morning devotion to spiritually prepare participants for their day of work. Devotions are optional.

8:00am  **Breakfast, clean up, and lunch packing:** ACYI staff will handle set up of breakfast and lunch packing stations. Participants pack lunch and eat breakfast each morning. Breakfast includes bagels, cereal, yogurt, and oatmeal. Lunch includes a sandwich, fruit, granola bars, and snacks. One group will be responsible for clean-up chores each day.

9:00am  **Travel to work sites:** Every day your group will be going to a different work site in order to allow for a variety of experiences throughout the week. An effort is made to give groups 4 ½ to 6 hours of work or education per day, so groups may be at two sites in one day or stay all day at one site, depending on the needs of the day.

12:30pm  **Lunch:** Neighborhood Groups will determine an appropriate time to eat bag lunches at the work sites, depending on the tasks to be completed each day.

2:30pm  **Afternoon Programing:** ACYI Staff will lead you in discussion groups, activities and panels to help your group better understand the work they’re participating in throughout their week.

6:15pm  **Dinner Chores:** A small group of students will be responsible for setting up dinner each day, guided by ACYI staff.
6:30pm Dinner: A delicious and nutritious meal will be provided by our professional chef and kitchen staff. On two nights of the week, the adult leaders will eat together. ACYI staff will facilitate an adult workshop for processing events of the week thus far.

7:00pm Dinner Chores: The same group that set up dinner will be responsible for clean up as well.

8:00pm Evening Movie: Most nights we will watch a movie and use it as a jumping off point for discussion the rest of the week.

10:00pm Free Time: Feel free to play group games, or begin getting ready for bed.

11:00pm Lights Out: Everyone is expected to be in their beds at lights out.

Free Afternoon
We shorten your workday once during the week to give you free time to explore the exciting attractions of Philadelphia on your own. For your free day, you’ll have approximately 5-6 hours free in the city to do as you wish with your group. We will give you more information about timing and expectations as we move closer to the summer.

Departure
Your departure from TCP should be no later than 9:30 AM on Friday. Before leaving, your group is responsible for sweeping and cleaning up the room you occupied to ensure its cleanliness for the group that is coming in after you. ACYI will provide an on-the-go breakfast (fruit, granola bars, etc.) as you are packing up before you leave.
PACKING LIST

In addition to the obvious clothing and toiletry items, please have each participant pack:

- Sleeping bag/sheets/blankets and a pillow
- Water bottle! You will be asked to use this instead of paper cups to reduce waste
- Some spending money for your free afternoon
- Sunscreen, bug spray, and hat for outdoor work sites
- Shower shoes
- Shower kit (including a bag for carrying shower supplies to and from shower sites)
- Bath towel
- Clothes to work and get dirty in
- Closed toe shoes
- Long pants (some sites require long pants, which you can carry with you to change when you arrive to work)
- Lunch box
- Modest and appropriate clothing
  - Many sites have a policy about the length of shorts. When arms are resting at your sides, shorts should be at least middle fingertip length. We also do not recommend spandex or tight-fitting bottoms for males or females. If the staff feels that any clothing is inappropriate for work sites, participants may be asked to change.

What not to pack:
- Drugs, alcohol, tobacco, fireworks, or weapons of any kind
- Gaming devices and video players
- Air mattresses! We have cots.
A Note About Solidarity and Relational Engagement

A Common Youth Initiative expects that all participants — adults and youth alike — live simply and act in solidarity with the vulnerable populations with whom you will be engaging. You can do this in a variety of ways.

Work on Consumerism
First, you can work to reduce your consumerism. As an act of solidarity with those members of our community who may not be able to spend a frivolous $5 on snacks, coffee, or soft drinks, your group is expected to dissuade yourselves from extraneous purchases. ACYI is ready and able to provide all food, drink, and supplies you should require during your time with us. Additionally, it is important to keep in mind that not all participants attending ACYI will have the income to spontaneously buy treats. Our rule of solidarity allows us to be in relationship with one another rather than in relationship with our money and material possessions.

Live in Solidarity
Another component of solidarity is our sleeping and showering accommodations. ACYI is housed in a church that is over 100 years old, and while we do not have the modern convenience of beds or central air in our building, we do guarantee cots each night and access to showers throughout the week. Consider your time with us as a chance to live in solidarity with those whom throughout the week you serve.

Limit Use of Cell Phones and Technology
Finally, we limit the use of cell phones and technology to free time hours only. During all work hours, meal hours, and programming hours, all cell phones (for youth, adults, and ACYI staff) should be out of sight unless in the case of emergency, to communicate with other groups, or when it is an appropriate time for taking photos. We limit the use of cell phones and technology in order to promote relationship building and community among people who are physically present. That being said, participants are more than welcome to call home and to use their phones during the designated free times.
2020 Summer
A Common Youth Initiative

Summer 2020
We will be hosting six sessions of A Common Youth Initiative programming in 2020:

- **Session 1**: Sunday, June 28 – Friday, July 3
- **Session 2**: Sunday, July 5 – Friday, July 10
- **Session 3**: Sunday, July 12 – Friday, July 17
- **Session 4**: Sunday, July 19 – Friday, July 24
- **Session 5**: Sunday, July 26 – Friday, July 31
- **Session 6**: Sunday, August 2 – Friday, August 7

If you are interested in registering, contact Hannah Johnson (acyi@thecommonplacephilly.org or 267-275-8238 ext. 305) to check availability and to receive our Registration Form and Participation Contract!
Fees and Registration Information

Participation Fees
All groups participating in A Common Youth Initiative programming will need to pay a $200 nonrefundable registration fee plus a participation fee (per participant) as follows:

- For ACYI (Sunday to Friday): $500 per person

The participation fee includes: all meals during your time here (except free afternoon); program supplies; public transportation to/from work sites; staffing; accommodations.

How to Register
1. Contact Hannah at acyi@thecommonplacephilly.org to check availability for the dates in which you are interested. Once she confirms availability, she will send you the Registration Form and Participation Contract.

2. Complete the online Registration Form and Participation Contract and send in your $200.00 Registration Fee. This Registration Fee is non-refundable and holds the dates for your group. See below for how to make a payment.

3. Finalize your group numbers, and begin paying your Total Amount Due in installments, as scheduled below:

   For A Common Youth Initiative Week:
   - 1st Installment (1/3 of total amount due) PLUS $200 registration fee upon registration
   - 2nd Installment (1/3 of total amount due) by February 14, 2020
   - 3rd Installment (1/3 of total amount due) by May 15, 2020

4. Calculate your Total Amount Due as follows:
   - $200 (registration fee) + (# participants X $500) = Total Amount Due

NOTE: As soon as you begin paying your installments, the number of participants for whom you are paying cannot be lowered. If your group size increases, however, we may be able to adjust accordingly if available space allows.
How to Make a Payment
Please make checks payable to The Common Place. Indicate “YI (SESSION DATE) - Installment #___” on the memo line.

Checks should be mailed to:
The Common Place ATTN: ACYI
5736 Chester Ave
Philadelphia, PA 19143

Unfortunately, we are not able to accept credit card payments for ACYI Payments.

Necessary Forms
At the end of this packet, you will find a Medical History/Release Form for youth and adult participants. Please have each member of your group complete a Medical History/Release Form, and bring one copy of each form to hand to the Coordinator of ACYI upon arrival at TCP.

You will need to complete the Participant Roster found at the end of this packet and submit it to Hannah Johnson by June 1. If you submit your roster late, we cannot guarantee our ability to accommodate any dietary restrictions.
Frequently Asked Questions

What are adult leaders responsible for?

Group leaders and adults are responsible for assisting ACYI staff in ensuring that all participants are safe, healthy, and upholding our commitments to each other for the week. Leaders are also responsible for assisting ACYI staff and site volunteer coordinators in managing participants as they complete their work tasks and participate in evening and overnight activities.

While ACYI staff lead the small group discussions and work projects, adult leaders are responsible for helping to keep youth engaged in the conversation and maintaining a positive, motivated work ethic. Adult leaders know their youth better than we do, so our staff relies on their presence and support in creating a deep and meaningful experience for all the youth! Finally, adult leaders are responsible for supervision of youth during any free time during the day, evening and overnight hours.

Trust ACYI staff to ensure that all details of your experience are taken care of so that you can engage in meaningful ways with your group! If you would like to meet with your group, let us know, and we can work with you to allow time for that.

Time with A Common Youth Initiative can prove to be a challenging week spiritually and physically; all participants should be healthy enough in mind and body to endure long work hours and considerable amounts of walking. Please keep these responsibilities in mind while selecting your group leaders. Each evening, all group leaders will have the opportunity to meet with the Coordinators of A Common Youth Initiative to bring up any comments, concerns, or questions.

What if someone in our group has a dietary restriction?

Both of our kitchens are fully capable of accommodating any dietary needs. Please let us know well in advance of any special accommodations we may need to make. Complete and submit the Participant Roster by June 1 to ensure that we can accommodate any dietary restrictions or special needs.

Do we need vehicles?

You will need access to cars throughout the week to get from place to place. In addition to transporting your own students, you’ll need at least two extra seats for ACYI staff. The Common Place has a parking lot that locks at night, so your vehicle will always be safe. There will be some days that we take public transportation, and others where driving makes more sense.
Will we be safe?  
We visit all corners of Philadelphia throughout our week together. While some may see the neighborhoods we visit as the “rough parts” or “dangerous parts” of the city, we see these neighborhoods as being stereotypically misunderstood and often misrepresented. ACYI has longstanding relationships with each of the work sites and communities we visit. We ensure that your group will be housed in a safe space but with easy access to the variety of neighborhoods that exist in Philadelphia. Furthermore, the Coordinators of ACYI are in constant communication with work sites to assess current safety concerns of the areas that participants visit.

Primary goals of ACYI include breaking down social barriers, engaging with communities different from our own, and acting with compassion towards all of God’s creation. Doing so requires us to step outside of our comfort zone, but we will never do so if there is a direct threat to the safety and well-being of our participants.

May we bring any donations?  
Yes, please! If you are driving and have extra room, we welcome clothing and personal care/hygiene items. For a current list of what our particular needs are, please ask and we can guide you in how you can be most helpful! We also welcome and encourage monetary donations in the form of a Sunday worship offering as well as general support of our program. The work of ACYI is important and requires a great deal of resources to serve the needs of our most vulnerable brothers and sisters.

What are the appropriate age groups for A Common Youth Initiative?  
Our activities are primarily designated for high school-aged youth, preferably 14 years of age or older. Each year, however, we also accommodate a number of mature middle school-aged youth (not younger than 11 years of age) and have the capacity to blend them into high school groups when appropriate.

What is the weather going to be like?  
Although Philadelphia’s summer temperature average remains in the mid-80s, it can range from the mid-70s to upper-90s. During July and August, we often see high levels of humidity—and consequently, a high heat index. Our building is not air conditioned, and many of our worksites are outdoors. We will assess the heat index each day and have excessive heat plans ready to ensure the health and safety of all participants. All worksites have access to fresh water to refill water bottles.

Where will we be working?  
Your group to work at sites addressing a variety of social justice concerns. We work to balance the number of outdoor sites and indoor sites, food-related sites, sites working with children, and other factors to foster the most holistic experience possible. Some sites include:
MEDICAL History/Release Form {YOUTH}

Bring one copy of this form for each youth participant under 18 years old

Contact Information

Participant’s Name ___________________________________________ M / F / NB / Other (circle)
Preferred Name ______________________________________________
Age (upon ACYI arrival) ____________________________
Participant’s Email __________________________________________ Date of birth ______________

Church or group you are coming with:

__________________________________________________________

Parent/Legal Guardian Name ___________________________________________________________
Cell Phone ( ) ____________________________
Home Phone ( ) ____________________________
Work Phone ( ) _____________________________

Home Address

__________________________________________________________
City ____________________________ State __________ Zip ____________

Parent/Legal Guardian’s Email Address

__________________________________________________________

ACYI will not give or sell your information, but will use it to stay in touch

Insurance Information

Health Insurance Co. ____________________________ Policy # ____________________________
Family Physician ____________________________ Phone ( ) ____________________________

Does your insurance carrier require a second opinion before emergency procedures are
undertaken? Please circle: ( Yes / No )
If parent/guardian can’t be reached in an emergency, please contact:

Name: \\
_____________________________________________

Relationship: \\
_____________________________________________

Cell Phone: \\
_____________________________________________

Home Phone: \\
_____________________________________________

Medical History
The following information is required to ensure that your youth’s individual needs are met while attending ACYI (Broad Street Ministry and The Common Place). Information is confidential and will be made available to staff, adult leaders, and medical professionals only as necessary (i.e., those people who are directly responsible for your child’s well-being). In the event of an emergency, every effort will be made to contact the parents or designated individual. For their safety and well-being, youth will not be allowed to attend without a completed and signed Medical Treatment Authorization and Waiver & Release Form.

Date of youth’s last tetanus shot:
_____________________________________________

Please list any physical or behavioral conditions that the program staff and adult counselors should be aware of (sleepwalking, epilepsy, diabetes, fainting, depression, eating disorders, asthma, etc.). Please be specific so that we can provide the best care for your child:

____________________________________________________________________________________

____________________________________________________________________________________

Is your youth allergic to any food, medication or insect bites, or any substance? (Yes / No) If yes, please list particular allergy and probable reaction:

____________________________________________________________________________________

____________________________________________________________________________________
Does your youth have any specific dietary needs or restrictions (gluten intolerant, vegetarian, etc.)?  (Yes / No) If yes, please indicate:

________________________________________________________________________

________________________________________________________________________

Is your youth currently taking any medication? (Yes / No) If yes, please list all medications that your child will be bringing including complete instructions for administering:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

May the staff/adult leader administer to your youth (please circle):

<table>
<thead>
<tr>
<th>Medication</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aspirin</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aspirin Substitutes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Eye Ointments</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Antihistamine or decongestant</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Motion sickness medication</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Laxative or anti-diarrhea medication</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Antibacterial or antibiotic ointment</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Insect bite or poison oak ointment</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Specific Instructions

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Note: If your child requires special care or diet, please contact us as soon as possible prior to arrival so that necessary arrangements can be made. Our chefs plan meals and order food before the participants arrive.
Medical Treatment Authorization

In the event that medical treatment for my child is required, I authorize a representative of ACYI to take my child to be treated at a nearby hospital or physician’s office. I also understand that I will be financially responsible for any medical treatment rendered.

PRINT Name of Minor Youth:
______________________________________________________________

SIGNATURE of Parent/Legal Guardian:
______________________________________________________________

PRINT Name of Parent/Legal Guardian:
______________________________________________________________

Relationship to Minor Youth: ___________________________ Date: ___________________
Waiver and Release of Liability
In consideration for the permission granted to A Common Youth Initiative (“ACYI”) for __________________________ (hereinafter the “Minor”) to participate in the Youth Initiative, on behalf of the Parent/Legal Guardian (hereinafter “Guardian”) and the Minor, and each of the Guardian’s and the Minor’s heirs, executors, and administrators, the Guardian and Minor hereby waive and release any and all causes of action, claims, suits, damages, and judgments, in any form whatsoever, arising from or by reason of any and all known or unknown, foreseen or unforeseen bodily or personal injuries (including death), property damage, theft, or loss resulting from the Minor’s participation in ACYI and related activities, against ACYI and their employees, contractors, board of directors, volunteers, and agents, whether caused by the Minor’s negligence, another person’s negligence or otherwise.

IN WITNESS WHEREOF, and intending to be legally bound, we have executed this document below.

SIGNATURE of Parent/Legal Guardian:
______________________________________________________

PRINT Name of Parent/Legal Guardian:
_____________________________________________________

SIGNATURE of Minor Youth:
_______________________________________________________________

PRINT Name of Minor Youth:
______________________________________________________________

Date:  ____________________________________________________________________________

Media Release
As parent/guardian of ____________________________, I understand, accept and agree that participation in A Common Youth Initiative (ACYI) may result in publicity for educational or promotional purposes. Therefore, I irrevocably authorize ACYI to use and publicize my child’s name, for any publication, promotion, trade or business use, or for any other purpose related to ACYI. I give my permission for ACYI to distribute, now or in the future, any filmed or recorded material involving my child. Said material may be distributed to anyone, for any purpose, including the general public, magazines, newspapers, television, or radio stations. I specifically authorize ACYI, now or at any time in the future, to publicize the name of my child, and forever discharge ACYI from and against any and all claims, of any type, which arise from, or are related to, ACYI’s use, distribution, or disclosure of any
photographs, films, videotapes, electronic recordings or other information, regarding my child and ACYI. I waive the right to inspect publications or products that include my child prior to their release.

SIGNATURE of Parent/Legal Guardian:

_______________________________________________________

PRINT Name of Parent/Legal Guardian:

_____________________________________________________

Date:  ____________________________________________________
MEDICAL History/Release Form  {ADULT}

Bring one copy of this completed form for each participant over 18 years old

Contact Information

Name ___________________________________________ M / F / NB / Other (Circle)
Prefered Name ____________________________________
DOB ____________________

Home Address
________________________________________________________________________

City ___________________________________ State ______
ZIP _________________

Email ___________________________________________
Phone ________________________________

Church or group you are coming with
________________________________________________________________________

ACYI will not give or sell your information, but will use it to stay in touch

Insurance Information

Health Insurance Co. ___________________________ Policy # ________________

Family Physician _____________________________ Phone ( ) ________________

Does your insurance carrier require a second opinion before emergency procedures are undertaken?
Please circle: ( Yes / No )

20
Emergency Contact

Name:_________________________________________________________________________________

Relationship:__________________________________________________________________________

Cell Phone:____________________________________________________________________________

Work Phone:____________________________________________________________________________

Home Phone:____________________________________________________________________________

Medical History

Information contained herein is confidential and will be made available only to staff and medical
professionals as necessary.

Date of last tetanus shot:_________________________________________________________________

Please list any physical or behavioral conditions that the program staff should be aware of
(sleepwalking, epilepsy, diabetes, fainting, depression, eating disorders, asthma, etc.). Please be
specific:

____________________________________________________________________________________

____________________________________________________________________________________

Are you allergic to any food, medication or insect bites, or any substance? (Yes / No) If yes, please list
particular allergy and probable reaction:

____________________________________________________________________________________

____________________________________________________________________________________
Are you currently taking any medication? (Yes / No)  If yes, please list all medications:

____________________________________________________________________________________

____________________________________________________________________________________

Do you have any specific dietary needs or restrictions (gluten intolerant, vegetarian, etc.)? (Yes / No)

If yes, please indicate:

____________________________________________________________________________________

Medical Treatment Authorization
In the event that I require medical treatment, I authorize a representative of ACYI to take me to be treated at a nearby hospital or physician’s office. I also understand that I will be financially responsible for any medical treatment rendered.

SIGNATURE of Participant: ________________________________________________________________

PRINT Name of Participant: ________________________________________________________________

Date: __________________________________________________________________________________

Waiver and Release of Liability

In consideration of my participation in A Common Youth Initiative, I hereby waive and release any and all causes of action, claims, suits, damages, and judgments, in any form whatsoever, arising from or by reason of any and all known or unknown, foreseen or unforeseen bodily or personal injuries (including death), property damage, theft, or loss resulting from my participation in A Common Youth Initiative and related activities, against and their employees, contractors, board of directors, volunteers, and agents, whether caused by my own negligence, another person’s negligence or otherwise.

IN WITNESS WHEREOF, and intending to be legally bound, we have executed this document below.

SIGNATURE of Participant: _______________________________________________________

PRINT Name of Participant:  ______________________________________________________________

SIGNATURE of Witness:  _______________________________________________________________

PRINT Name of Witness:  ______________________________________________________________

Date:  _____________________________________________________________________________

Media Release

I understand, accept and agree that participation in A Common Youth Initiative (ACYI) may result in publicity for educational or promotional purposes. Therefore, I irrevocably authorize ACYI to use and publicize my name, for any publication, promotion, trade or business use, or for any other purpose related to ACYI. I give my permission for ACYI to distribute, now or in the future, any filmed or recorded material involving me. Said material may be distributed to anyone, for any purpose, including the general public, magazines, newspapers, television, or radio stations. I specifically authorize ACYI, now or at any time in the future, to publicize my name, and forever discharge ACYI from and against any and all claims, of any type, which arise from, or are related to, ACYI’s use, distribution, or disclosure of any photographs, films, videotapes, electronic recordings or other information, regarding myself and ACYI. I waive the right to inspect publications or products that include me prior to their release.

SIGNATURE of Participant:  _______________________________________________________

__________________________________________________________
**Summer Youth Immersion Participant Roster**

Please list your final participant list here. This will be used to create work groups and prepare for dietary restrictions. We cannot guarantee that we can accommodate dietary restrictions without advance notice.

Church/Group: ________________________________________________

Dates Attending: ____________________

Contact Person: ________________________________________________

Daytime Phone: _______________________

<table>
<thead>
<tr>
<th>PARTICIPANT NAME</th>
<th>Youth or Adult?</th>
<th>If Youth, Age?</th>
<th>Gender</th>
<th>Dietary Restrictions?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>