





Northwest Region Youth of Unity

**RALLY 2010**

April 23 – 25

# ***"You Are Home"***

**Y.O.U. Rally** is a 3-day communion with Spirit. Daily activities include large group workshops, small group discussions, singing, meditation, dancing, prayer and vespers.

**Mission Statement 2009-2010 NW YOU Leadership Team:**

We, the leadership team of the Northwest Region, foster spiritual growth by providing a positive, focused, and an uplifting atmosphere. Led by unconditional love, we will encourage open hearts and open minds.

**HOSTED BY: The Northwest Regional Youth of Unity Leadership Team**

**Chelsea Blakeley**

Co-representative 09-00

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**Jackie Green**

Consultant

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Spokane Vly WA 99212

509 928 0896

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**Eligibility age requirement** to attend Rally: A Y.O.U.er must be at least 14 [or in ninth grade] and no more than 18 years [or a high school senior] *exceptions for regional and international officers.*

**Attendees** are people who have demonstrated maturity, self-discipline & self-responsibility. Rally is for people who have a sincere desire to learn more about Truth & are willing and able to contribute by actively participating in Rally activities. It is recommended that those attending have attended at least 4 chapter meetings. **ADULTS must send a copy of their background check with registration.**

**To Register** send

(1) List of attendees from your chapter

(2) Medical/Liability Release Form for each person

(3) Heart Agreement Form for each person

(4) 1 check for chapter @\$180 each person (\$160 postmark by 3/24/2010) *[If cancel \$40 retained]*

**Send Registration to Jackie Green, 7710 E Beverly, Spokane Valley, WA 99212**

**Arrive** between 4-5 p.m. on Friday.

**Depart** after closing circle on Sunday. Sack lunches are provided for traveling.

**Money** to share a love offering on Sunday and for travel is suggested. No store exists on the grounds. Come supplied with personal items.

**Housing** is in one of three dorms. You will be assigned to one of four rooms in the dorm. On arrival check in at the registration office where you will receive your room assignment and instructions.

**Assignments** are random. In your dorm room and workshop family of 8-10, you will have an opportunity to learn about yourself and others and make lasting friendships.

**Electronic devices** [phones, pagers, C.D., DVD players and other such items] remain in your car at all times. (Musical electronics can be on in the barn area during free time Saturday afternoon while rehearsing for the "spirit sharing". Also leaders will use them for meditation time.)

**Business Meeting Agenda** items must be in 10 days prior to Rally. Submissions to the Rally newspaper need to be in one month prior to Rally. Contact Hank or Hope.

**"Spirit Sharing"** registration forms are to be submitted prior to rally. Bring your skits, props, instruments, costumes and creative imaginations. The theme and spiritual intent of Rally are to be reflected in all the acts. Keep this in mind while choosing and preparing your part.

**Forms are complete with required signatures. All participants**, adult and teen, need their own signatures, plus staff witness AND minister. ALL Y.O.U.er's, **even 18 or 19 year old seniors**, need parent or guardian signature. Three copies of the Medical/Liability Release Form are necessary. Keep one copy for your church /chapter. Carry one copy to and from Rally. Send one copy with the registration. Registration without this form will not be accepted.

**All scheduled activities** are required attendance because every person and activity adds to the Rally experience. There will be free time on Saturday afternoon for alone time or to be with friends.

**During free time** miscellaneous recreation equipment is available. Hiking trails are marked. The lounge is for quiet sharing.

**Meals** are served family style and are similar to public school lunches. The Cispus staff attempts to meet special dietary needs when asked in advance.

**Bring:**

1 Medical Release Form (your copy)	2 Sleeping bag
3 Towel/wash cloth	4 Personal care items
5 Clothing for warmth and dryness	6 Shoes for the dance
7 Props for "Spirit Sharing"	8 Love offering

**Cost** is \$180 (\$160 by 3/24) includes meals & lodging from Friday dinner 5 PM through Sunday sack lunch, plus photo, newspaper/prayer panel and t-shirt.

**Cancellation fee** of \$40 will be retained to cover pre-Rally expenses.

**Chapter sends** 1 check or money order payable to Northwest Youth of Unity.

**For messages in an EMERGENCY**, call 360-497-7131 person-to-person. (No cell phone service)

# Love Note

Since Rally 2010 “ ” is intended to be a weekend communion with one’s soul *and* Mother Nature, we invite you to **LEAVE ALL ELECTRONICS AT HOME OR IN THE CAR UPON ARRIVAL**. This includes iPods, cell-phones, mp3 players, or any other electronic devices.

\*Family Group Leaders are invited to bring a boom-box or other stereo in order to play music during family groups.

\*Musical electronics can be used in auditorium during free time Saturday afternoon while rehearsing for Spirit Share.

\*Vesper Leaders will be provided with alarm clocks- so no cell phone or iPod alarm is necessary.

If your parents need to contact you for *emergency* reasons, call 360-497-7131 person-to-person. There are two outside pay phones for calling home if necessary. Jackie Green will have her cell phone with her- (509) 995-3036, yet there is no service at Cispus.

This weekend, we intend to detach our-selves from our modern lifestyle, and retreat to a spiritual space. Please honor this request, and in doing so, you will be respecting yourself, your experiences, and those of others. This event is going to be awesome, and we need everyone’s participation and willingness in order to create the spiritual environment we know you will benefit from!

Peace, Love, Happiness, Truth  
Nathan, Chelsea, Anna & Jackie



### ADULT AND TEEN Group Heart Agreements

I have free choice to attend regional or subregional events. If I choose to attend, to insure the ultimate experience of all participants I agree to OUR HEART AGREEMENTS which CREATE OUR SAFE SACRED Y.O.U.

I agree to honor the environment. I will:

- Promote the event purpose that is to experience a spiritual high & share this high with others.
- Honor this event as a smoke-free / drug-free environment.
  - Not use or have in my possession tobacco products from leaving home until return.
  - Not use or have in my possession alcohol or nonprescription drugs from leaving home until return.
- Support others in keeping the agreements.
- Use strategies to support myself in keeping my agreements.
- Leave all phones, iPods, iTunes, CD players & other electronic devices at home or locked in car (Unless needed during 4 PM rehearsal in barn area or for family meditation times).

I agree to honor boundaries. I will:

- Attend the entire weekend experience from beginning to end.
  - Attend all functions punctually.
- Remain in the cabin & workshop to which I am assigned.
  - Stay out of the dorms of the opposite sex.
- Cooperate with lights out & with my cabin sponsor.
  - Honor silence after midnight.
- Leave the facilities as good as, or better than, I find them.
- Leave all vehicles parked from arrival until departure.

I agree to honor people. I will:

- Use language that represents my indwelling Christ.
  - Not be part of character assassinations, put-downs, name-calling or judgments of other people or myself. No cursing.
- Abstain from all sexual activity & expressions of romance.
  - Hug in friendship & not touch or dance in a sexually provocative way.
- Look for the highest good in all people & situations.
  - Give my loving support & attention to all speakers.
- Practice centering during group meditations.
  - Remain silent & non-distractive to others.
- Look ways I can make this time a special & unique experience for myself & someone else.

I understand that these agreements have been developed by the Y.O.U. to communicate expectations for those choosing to attend events. If I disregard my agreement to respect them, or if *my behavior is unsafe to others, or myself* I can be sent home at my own or parents' expense. I also understand that this agreement applies for any other Y.O.U. event that I attend within a year of this date. *All attending Y.O.U. events must sign these agreements. Talk about them together as a group. (Note that when one member of the chapter breaks an agreement the entire group may have to leave as they are traveling together)*

#### Photography Release

I hereby grant the Church, Region, Association and its representatives permission to use, without compensation or restriction, photographs and videotapes images (from local and regional Unity events) in which the participant appears, in any manner whatsoever such as, but not limited to: publication, display, advertising, slide shows, etc.

#### Confidentiality

I understand that health information on this form will only be shared, as needed, with group leaders, church staff and medical professionals to safeguard and support the participant. This information will not be publicly disseminated or released to any outside organization. However, since it is common practice for the Church (or Region) to publish a participant's address, phone number &/or birthday on the group's roster if they actively participate in the group (or attend a regional event), I authorize the Church (and Region) to publish such information on a local (or event) roster EXCEPT for the following (please specify):

#### Limit of Consent

The consent outlined in this Medical/Liability Release, concerning my child's participation in Youth Ministry activities, expires next **September 1** (or earlier, if listed here: \_\_\_\_\_). **It is my responsibility to notify the group leaders or minister if any information changes or I decide to withhold consent.**

Participant's Church/Chapter \_\_\_\_\_

Print Name of Participant \_\_\_\_\_

Signature of Participant \_\_\_\_\_

**If YOUer [regardless of age]: Print Name of Parent/Guardian** \_\_\_\_\_

**Signature of Parent /Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Minister's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Adult & Teen **MEDICAL/LIABILITY RELEASE** [Rev. 9/08]

**FOR ACTIVITIES SPONSORED BY THE NORTHWEST REGION UNITY & LOCAL UNITY CHURCH**

Complete form in INK. Form can be kept on file until following September 1, but must be UPDATED if any information changes. Copy of form is to be sent with registration to regional events, Copy of form is to be carried with participant to every event.

UNITY CHURCH: \_\_\_\_\_

Name of Participant: \_\_\_\_\_ Birth Date: \_\_\_ / \_\_\_ / \_\_\_ Grade: \_\_\_

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

Name of Parent / Guardian, if *YOUer* \_\_\_\_\_ Relationship: \_\_\_\_\_

Address \_\_\_\_\_ City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ other numbers to use (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Emergency contact(s): Name \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

As legal guardian of the above-named participant, I give my permission for him/her to travel and participate in Youth of Unity activities. I am familiar with and approve the mode of transportation, the leadership accompanying the group and other circumstances of the trip.

I certify that the above-named participant is in good health and able to participate in all activities: \_\_\_ YES \_\_\_ NO *If NO, specify limits of participation:*

I certify that the participant's behavior allows for cooperative participation in various camp settings without disruption to others or compromising their safety or the safety of others \_\_\_ YES \_\_\_ NO

Is the minor under health care guidance for: \_\_\_ Allergy \_\_\_ Epilepsy \_\_\_ Diabetes \_\_\_ Asthma \_\_\_ Counseling \_\_\_ ADHD/ADD  
Does this participant have special needs that we should be aware of to make this retreat experience positive?

Are there any life circumstances that sharing with adult leaders will support them in supporting this participant?

Does this participant have an IEP in place? \_\_\_ If there is, please send a copy with the application so we can make sure we can meet all of the needs.

Other condition or special care needs? \_\_\_\_\_ Sleep needs? \_\_\_\_\_

Allergic to any food or medication? \_\_\_ YES \_\_\_ NO *(If YES, specify: \_\_\_\_\_)*

Current Medication \_\_\_\_\_ Date of last Tetanus shot \_\_\_\_\_

*Group leaders must be informed of any prescription medication brought by youth, with clear information as to proper use and dosage. If medication is "as needed", this participant must understand the symptoms of their condition and know when to ask for help.*

Family Physician (*name & phone number*): \_\_\_\_\_

Medical Insurance (*company & policy number*): \_\_\_\_\_

Phone # to verify coverage or submit claim: \_\_\_\_\_ Policyholder's name: \_\_\_\_\_

***About Insurance Cards – It Could Be Important!***

A hospital may require a Social Security number and/or insurance card as proof of insurance) before treatment or admittance. You should make sure the participant carries that information to events, or you can provide that information here: SS# \_\_\_\_\_-\_\_\_\_-\_\_\_\_\_ or **attach copies (front and back) of insurance card to this form.**

As the above-named participant (or legal guardian if the participant is a minor under the age of 18), I hereby attest that I have read this complete document; all information provided is complete and true; I have legal standing to make decisions which affect the rights of the above named participant; and I understand and consent to all terms outlined in this document. I hereby voluntarily and knowingly assume all risks and dangers inherent and incidental to Youth Ministry activities and travel understanding that some activities may pose a risk of injury. I will not hold liable the Church, or the Association of Unity Churches (Association) or the Northwest Region of the Association (Region), their employees, agents and event/youth group leaders for any injury, illness or property damage involving the above-named participant no matter how caused. Whenever deemed necessary by group leaders, I authorize the calling of a doctor and/or the providing of other medical services and, unless covered by insurance, agree to pay for same. If the above-named participant is incapacitated or under age 18, I do hereby authorize group leaders as agent for the undersigned, to consent with respect to such participant to any x-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment, and hospital care which is deemed advisable by a state-licensed physician or surgeon.

**Signature of Adult Participant or *Parent / Guardian of YOUer of any age*** \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\* SIGNATURE MUST BE NOTARIZED, or WITNESSED BY CHURCH STAFF OR TRUSTEE \*\*\*\*\*

Witnessed by: \_\_\_\_\_  
Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

## Spirit Sharing Registration Form

Spirit expresses through us in a variety of ways. All expressions are of great value. Some are more private, while others are best expressed in public. In the past, the public expression has been called a talent show. In recent years however, we have chosen to place the emphasis on SPIRIT rather than talent and on SHARING rather than show.

We know that all of us have unique gifts and talents, whether or not we have ever appeared on a stage. In our "sharing," we do not perform to call attention to ourselves, but rather to celebrate how it is possible to call for an expression of God (good) through music, drama, comedy, dance art, etc.

We encourage the co-creation that is involved with Chapter Skits and the inclusion all YOUers from your chapter in the Skit. Please use a separate registration form for a Chapter Skit and include the names of all individuals participating in the Skit. Whether you are registering for a Chapter Skit or an individual Spirit Sharing, you will want to make sure that what you share meets these guidelines.

### Guidelines for Participation in Spirit Sharing

1. Y.O.U. event themes are intended to promote spiritual growth. Select something to share that is of an inspirational nature.
2. Each Y.O.U.er may perform [be on stage] ONE time [plus in one chapter skit]
3. Individual performance or Chapter Skit not to exceed three (3) minutes.
4. Lip-syncing not accepted.
5. Exposing the body in any way & suggestive body movements not accepted.
6. Ridicule of any ethnic group, race, or gender not accepted.
7. Supply own props, costume, musical accompaniment, either recorded or live.
8. Sponsor participation only in the following:
  - \* support or participation in chapter skits
  - \* support performance of YOUers (coaching, accompanist, etc.)
  - \* review Participation Guidelines with each YOUer
  - \* review, with YOUer, words of songs & content of performance to follow guidelines

*[For clarification & interpretation of guidelines contact Jackie]*

Thank you for your willingness to share the good that God is expressing through you. Thank you for supporting the spiritual intent of Rally/Retreat in your contribution to Spirit Share. There will be a meeting for all performers on Saturday afternoon to take care of the final planning and organizing. Please, be sure to attend this meeting, if you have registered.

**Spirit Share has 20 slots of 3 minutes each [allowing time for introductions and stage set ups/take downs].**

**Time slots are assigned on a first come, first served basis. IF slots are available there will be on-site sign ups.**

Pre-register

by email: [jackienwyou@comcast.net](mailto:jackienwyou@comcast.net) or mail: Jackie Green 7710 E Beverly, Spokane Valley WA 99212

To participate fill out this form completely.

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**Spirit Sharing Registration**

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

Name of Act: \_\_\_\_\_ Length of Act [no more than 3 min] \_\_\_\_\_

**NOTE:** Bring your own props, recorded music and costume as needed.

My act involves (explain act and **write** lyrics/**words of songs** or poems):

[My act will not be accepted unless lyrics are submitted with this registration]

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# Northwest Region Y.O.U. Sponsor Agreements

## FOR ADULTS PARTICIPATING IN YOUTH MINISTRY

1. I prepare myself through prayer, meditation, contemplation and reflection.
2. I dedicate and consecrate myself to expressing the living Christ and honoring the Christ expression in others. I look to the indwelling Christ for inspiration to guide, govern, and prosper me and to behold the divinity in all people and situations.
3. I, as a Youth of Unity sponsor, dedicate myself to the principles of Truth as taught and exemplified by Jesus Christ, and interpreted by Unity School of Christianity and the Association of Unity Churches.
4. I teach Unity Truth teachings and help teens understand their own beliefs. I prepare for all lessons and activities. I prepare Y.O.U.ers for events by helping them to understand what the event is about, how it functions, the importance of agreements, and helping them clarify their own personal and spiritual growth expectations. *I am honest with students, and let them know that my beliefs come from my own spiritual awareness. I make sure they understand I am not telling them what to think.*
5. I adhere to all Northwest Region policies, event agreements and state laws. I work in harmony with the Region's event leaders, fellow sponsors and minister(s). Should I disagree with their plans or leadership style, I address the issue directly with them. *I promptly discuss any agreement violation, medical situation or concerns about a fellow sponsor's decision or conduct with the Regional Consultant.*
6. I hold sacred my role as sponsor and agree not to assume the role of professional counselor. I am not involved in Y.O.U. to be "one of them", to be seen as a parent or 'fix' anyone. Nor do I use Y.O.U. as my support group, but seek out a minister or my peers for advice and counseling on personal matters. I realize that my highest role is to pray with, support, and encourage Y.O.U.ers to live to their Christ potential. I create an atmosphere of love, safety, and support.
7. I respect and hold sacred all participants' expectation of confidentiality when sharing, and inform them in advance of my one obligation to report any threat of harm to oneself or to others. I discuss any suspicion of abuse or suicidal tendencies immediately with the Regional Consultant &/or minister.
8. My behavior sets the highest example, not compromising the integrity of the Y.O.U. experience in any way. Specifically in my role as Sponsor:
  - *My words and expressions honor the Christ in all people. I do not tell jokes or speak words that contain sexual innuendoes or dishonor any race or ethnic group. Nor do I discuss my sexual activity or experiences.*
  - *I use my role to be an encourager and supporter. I do not engage in put-downs or in any physical, mental, emotional or sexual harassment.*
  - *I do not prolong hugs, return or initiate a kiss.*
  - *I do not touch anyone in a sexual manner, including, but not limited to, the genitals, breasts or buttocks (which includes not allowing a teen to sit on my lap).*
  - *I am not with teens or adults in any compromising location or situation.*
  - *I exercise good judgment in regard to my relationships as to invite only the highest respect.*
  - *I do not use, illegal substances, alcohol or tobacco.*
  - *I truthfully, accurately, and in a timely manner complete all forms and requirements for events.*
  - *I lead by example by actively participating in all scheduled activities.*

I recognize, honor and accept the value of the Association of Unity Churches, Youth of Unity and these agreements. I will to the best of my ability, uphold the Youth of Unity's values, mission, vision and goals in service to this ministry. I will contact the Consultant if I am unclear about an agreement or its application to a particular situation.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that this adult demonstrates these agreements, and is unconditionally approved and sponsored by this ministry to participate in Northwest Region events as an adult sponsor. This individual has had a background check completed within the last two years and it is on file at our church. I understand it is our ministry's responsibility to notify the Regional Consultant should our ministry decide to modify or withdraw this affirmation of our support.

Signature of Minister/YED: \_\_\_\_\_ Date: \_\_\_\_\_ [Rev. '09]