

# Northwest Region Youth of Unity

RETREAT 2019

## “Levels of Balance”

October 11<sup>th</sup>-13<sup>th</sup>

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

**OUR MISSION:** As the Northwest Youth of Unity Leadership Team, our mission is to listen to the community and divine guidance with open minds in order to empower all within Northwest YOU We serve as forces of illuminance to light the paths ahead. This light holds both inner strength and confidence that will allow free, full, and authentic expression of ideas and Spirit.

**HOSTS: The Northwest Regional Youth of Unity Leadership Team**

**Antheny Chhay**

Co-representative 2019-2020

**Danika Buck**

Co-representative 2019-2020

**Nick Muncie-Jarvis**, YOU Consultant  
503-568-1692 you@unitynwregion.org

**Eligibility age requirement to attend:** YOUers must be at least 14 years old [or in ninth grade] & no more than 18 years old [or high school senior] *exceptions for regional officers.*

**Participants attend the entire weekend experience from beginning to end.** They are active members in their YOU group who have demonstrated maturity, self-discipline & self-responsibility. Retreat is for people who have a sincere desire to learn more about Truth and are willing and able to contribute by actively participating in Retreat activities. It is recommended that those attending Retreat have attended at least 4 chapter meetings in the last 3 months. ADULTS must send a copy of their background check with registration.

**Medical/Liability Release Forms:** Make 3 copies of each participant's signed forms.

ALL YOUer forms must have witnessed parent/guardian signatures. Keep one copy at your ministry. Carry one copy to and from Retreat. Mail one copy with the registration. Registrations without these forms will not be accepted.

**To Register** send the following to: Nick Muncie-Jarvis, 6820 SE 83rd Ave, Portland, OR 97266

- (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 @ \$195 each person** (\$170 postmarked by September 17<sup>th</sup>)

*[If cancel \$50 retained]*

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

**Depart** after lunch and closing circle on Sunday.

**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 dorms. You will be assigned to a room 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 family group of 8-10, you will have an opportunity to learn about yourself and others and make lasting friendships.

**Electronic devices:** During Retreat phones are to be set to airplane mode and used for camera and time-telling only. Please do not communicate thru text, calling, or social networks. Restrict use of iPods/MP3 players and other personal electronic equipment for rehearsing for the "Spirit Share" and/or if needed for sleep at night with headphones AND with permission of those around you. Leaders may use them for meditation times. Electronics are not meant to take away from your personal spiritual experience, so be conscious of their use. [For exceptions or emergencies see Nick Muncie-Jarvis, NW Y.O.U. Consultant]

**Agenda:** Contact Antheny, Danika and/or Nick` to offer input. Agenda items need to be in 10 days prior to Retreat.

**"Spirit Share"** registration forms must be submitted prior to Retreat. Bring your skits, props, instruments, costumes and creative imaginations. The theme and spiritual intent of Retreat are to be reflected in all the acts. Keep this in mind while preparing your act. Lyrics to all songs are needed prior to performing.

**Forms are complete only with required signatures. All participants,** adult and teen, need their own signatures, plus staff witness AND minister. ALL YOUer'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 ministry/chapter. Carry one copy to and from Retreat. Send one copy with the registration. Registrations without these forms will not be accepted.

**All scheduled activities** are required attendance because every person and activity adds to the Retreat 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. The Council Hall is open for quiet sharing.

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

**Bring:**

1. Medical Release Form (your copy)	2. Sleeping bag and pillow
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 \$195 (\$170 by 9/17) includes meals & lodging from Friday 5 PM through Sunday lunch, plus t-shirt.

**Cancellation fee** of \$50 will be retained to cover pre-Retreat expenses.

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

**For messages in an EMERGENCY,** call Nick 503-568-1692 or Waskowitz 425-888-0681 person-to-person.

## RETREAT LOCATION:

Camp Waskowitz 45505 SE 150th St, North Bend, WA 98045 is 3.75 miles E of North Bend, WA.  
Exit #34 - 468th Ave SW off Interstate 90

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From the NORTH take I-5 or I-405 to I-90 then go East past North Bend to exit#34 - 468th Ave SW

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From the SOUTH take I-5 to I-405 or Hwy 18 North to I-90

then go East past North Bend to exit#34 - 468th Ave SW

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turn right for 1 block then turn right again on 150th SE proceed 3/4 of a mile to camp

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From the EAST take I-90 to exit #34 - 468th Ave SW

turn left under freeway for 1 block then turn right on 150th SE proceeding 3/4 of a mile to camp.

## ADULTS SERVING AS SPONSORS ARE AT LEAST 25 YEARS OF AGE

*(Adults serving as Junior Sponsors are 21- 24 years of age and may attend as assistants)*

## ADULT ROLE AT RETREAT

### PRIOR TO THE RETREAT:

- **Read, discuss, and sign Group Heart Agreements**
- Promote a prayerful consciousness ready for spiritual study and enthusiastic participation. Discuss the purpose of the event, their feelings about attending, their expectations and what they can share. Stress the importance of prayer before and during Retreat.
- Become comfortable with touch (holding hands in a circle; non-threatening massage; touch exercises)

### DURING THE RETREAT:

- See that all your chapter's assignments at the event are completed
- Circulate and participate with youth in activities
- Meet and welcome new sponsors
- Remain on the grounds during weekend
- Lock automobiles securely
- Be aware of special needs such as discipline with a loving, firm, encouraging approach; emotional support; physical support with setting up, etc.
- Report all disciplinary action to Regional Consultant
- **If you are uncomfortable or questioning the choices or behaviors of YOUers or other adults consult with Nick Muncie-Jarvis before saying anything to the individual. [Unless it is a clear and immediate violation of the heart agreements, such as leaving the camp boundaries.]**

### IN DORM AREAS:

- Account in dorm room for all people by lights out and let Heidi or Pete know. If missing people, contact Nick.
- Support teens in a sharing & cabin gathering time each evening
- See that health/medication needs are met (can send to health room)
- Provide nurturing and support to "Dorm-mates"
- Check dorms to see that all are out before scheduled events
- Check dorms during weekend (to confirm that only those that belong there are present)
- Promote the cleanup of the dorms on morning of last day

## CHAPTER REGISTRATION FORM

On October 11<sup>th</sup>-13<sup>th</sup> we are planning to attend the Northwest Region Youth of Unity Retreat 2019. We signed the heart agreements and agree to abide by them.

Chapter: \_\_\_\_\_

Participant Name	Gender	Age or Sponsor	Shirt Size	Last Timer	Dietary Needs, i.e. Vegetarian

Mail one check per chapter, with Medical Liability Release, Heart Agreement, & photo/video release form to:

Nick Muncie-Jarvis NW YOU Consultant 6820 SE 83<sup>rd</sup> Ave, Portland, OR 97266

One check for chapter @ \$195 per person. *If postmarked by September 17<sup>th</sup>, the per person price is \$170 [In case of cancellation \$50 per person will be retained]*

## ADULT AND TEEN GROUP HEART AGREEMENTS

To ensure the ultimate experience for all and as a participant attending this event, I agree to uphold these agreements from the time I leave my home until the time I return from the event. I acknowledge that consequences may ensue if I do not honor these agreements.

1. To respect and take care of the facility, others and myself, I agree to:
  - a. Look for the highest good in all people and situations and not be part of character assassinations, pranks, put-downs or negative judgments of others or myself.
  - b. Find ways I can both give and receive to make this event a unique and meaningful experience.
  - c. Show loving support and gratitude for all YOUers, facilitators, speakers and camp staff and not offend or degrade others with my language, jokes, music, or actions.
2. To be open and fully present for the entire experience, I agree to:
  - a. Attend required activities on time.
  - b. Give my loving focus during activities.
  - c. Stay in designated areas.
  - d. Commit to arriving by the designated time for check-in for this event and stay through the scheduled closing time.
3. To honor the experience of others, I agree to:
  - a. Quietly seek a sponsor if I have difficulty focusing during any activities and need personal care.
  - b. Respect lights out and quiet time.
  - c. Remain in the spaces (family group, room, bed, etc.) to which I am assigned.
  - d. Not wear clothing that is offensive, inappropriate for the space, or that promotes illegal activity.
  - e. Not share bunks, blankets, sleeping bags or showers.
4. To maintain a positive, spiritual intention in all my relationships, I agree to:
  - a. Not engage in sexual activities, unwanted physical contact, or public displays of affection which cause others present to feel uncomfortable.
  - b. Recognize that others have different levels of comfort, experiences, and triggers with sensitive topics (such as sexuality, body image, family backgrounds, coping mechanisms, etc.).
  - c. Save discussions about topics that cause others to feel uncomfortable for private group sharing settings.
5. To keep my consciousness fully present at the event, I agree to not communicate with the outside world or other YOUers using technology. Acceptable uses of technology include: 1) picture taking or 2) checking the time. *For emergencies see Nick Muncie-Jarvis, NW YOU OConsultant.*
6. I agree to not use this event or my NW YOU connections to promote, encourage, facilitate, conceal or arrange participation in illegal or inappropriate activities—including but not limited to use or possession of alcohol, tobacco, nicotine, marijuana, illegal drugs or other restricted substances.
7. To support the consciousness of this event, I agree to uphold and enforce these agreements throughout my entire experience – from my travel to registration, through travel home after the closing of the event.
8. If I have difficulty abstaining from restricted activities or substances, I understand it is my responsibility to discuss support needs with a Sponsor or Nick Muncie-Jarvis. Consequences to broken agreements may include sponsor or peer discussion, or investigation of illegal activity in order to maintain a safe and spiritual space for all. Further consequences may include an individual/chapter being sent home early.

**Photography Release:** I hereby grant the Ministry, Region, Association and its representatives permission to use, without compensation or restriction, photos and videos with participants names (from local and regional Unity events) in which the participant appears, in any manner whatsoever such as, but not limited to: publication, display, advertising, slideshow, website, social media, etc.

**Confidentiality:** I understand that information on this form will only be shared, as needed, with group leaders, ministry 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 Ministry (or Region) to publish a participant's contact information on the group's roster if they actively participate in the group (or attend a regional event), I authorize the Ministry (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 1st** (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.**

Print Name of Participant: \_\_\_\_\_ Signature of Participant: \_\_\_\_\_

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

Parent /Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Minister's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Ministry: \_\_\_\_\_

**ADULT & TEEN MEDICAL/LIABILITY RELEASE**

[Rev. 5/19]

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

Complete form in INK. Form can be kept on file until following September 1st and must be UPDATED if any information changes. One copy of the form is to be sent with registration to regional events, and one copy should be carried with participant to each event.

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

Unity Ministry: \_\_\_\_\_ Personal Email: \_\_\_\_\_

Name of Parent/guardian (if YOUer): \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Other numbers to use: \_\_\_\_\_

Emergency Contact(s) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

As legal guardian of the above-named participant, I give my permission for them 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 the 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

The minor under health care guidance for:  ADHD/ADD  Allergy  Asthma  Counseling  Diabetes  Epilepsy  None

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/504 Plan in place?  YES  NO *If YES, 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(s): \_\_\_\_\_ 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 No. 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 Ministry, 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 a state-licensed physician or surgeon deems advisable.

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

**\*\*\*\*\* SIGNATURE MUST BE WITNESSED BY MINISTRY STAFF OR TRUSTEE or notarized \*\*\*\*\***

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

# Spirit Sharing Registration Form

[Rev. 5/19]

We ask your performance reflects and relates to the spiritual nature of the event. We encourage variety and individuality. Since this is a Unity event, we ask that your performance have a spiritual intention.

Spirit share is not a contest or competition. All talents and skill levels are invited to share! We have chosen to place the emphasis on SHARING rather than show.

## Guidelines for Participation in Spirit Sharing

1. YOU event themes are intended to promote spiritual growth. Select something to share that is of an inspirational nature.
2. Each YOUer may perform (be on stage) ONE time and may also be 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 are not acceptable.
6. Ridicule of any ethnic group, race, gender, sexual orientation, etc. is not acceptable.
7. Supply your own props, costumes, and musical accompaniment (either recorded or live).
8. Sponsor participation only in the following:
  - support or participation in chapter skits
  - support performance of YOUers (coaching, accompanying, etc.)
  - review Participation Guidelines with each YOUer
  - review, with YOUer, words of songs and content of performance to follow guidelines

*[For clarification & interpretation of guidelines, please contact Nick Muncie-Jarvis]*

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/Rendezvous 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 18 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.

### **Lyrics of songs/words for sharing MUST be submitted to participate.**

All performers need to be at this meeting to take care of the final planning and organizing.

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**Northwest Region YOU Sponsor Agreements  
FOR ADULTS PARTICIPATING IN YOUTH MINISTRY**

[Rev. 5/19]

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 World Headquarters and the Unity Worldwide Ministries.
4. I teach Unity Truth teachings and help teens understand their own beliefs. I prepare for all lessons and activities. I prepare YOUers 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 YOU to be "one of them", to be viewed as a parent or to 'fix' anyone. Nor do I use YOU 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 YOUers to live from their indwelling Christ. 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 and/or minister.
8. My behavior sets the highest example, not compromising the integrity of the YOU 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 about my relationships so as to invite only the highest respect.*
  - *I do not use, illegal substances, alcohol or tobacco.*
  - *I complete all forms and requirements for events truthfully, accurately, and in a timely manner.*
  - *I lead by example by actively participating in all scheduled activities.*

I recognize, honor and accept the value of Unity Worldwide Ministries, Youth of Unity and these agreements. I will, to the best of my ability, uphold the Youth of Unity 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. **I further certify that a current background check is on file at our ministry that confirms this individual has no felony convictions for violence or abuse.** 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 of this adult.



Signature of Minister/YED: \_\_\_\_\_ Date: \_\_\_\_\_

## NW Unity Travel / Driving Policy

1. Sponsors or designee of Sponsor/Minister/Board must accompany a Chapter/Youth Group to Regional, Inter-regional, Sub-regional activities, and Ministry Sponsored activities.
2. All participants are encouraged and expected to travel with Sponsor and Group to events.
3. YOUTH MINISTRY events are the International YOU Event, Regional Rally, Regional Retreat, Regional Rendezvous, Kids Camp Counselor's Training, Kid's Camp, Unitreat, Sub-regional Functions, and Local Chapter Functions. **Regular meetings are excluded unless a special event is planned that involves leaving the Ministry grounds in which case Travel Policies apply.**
4. Each car traveling to a designated activity must have a Minister/Board/Sponsor approved adult driver, 21 years of age or older.
5. Designated drivers must have a valid driver's license and at least 1-year driving experience.
6. Designated drivers must have adequate effective insurance coverage on car and occupants.
7. Cars transporting Youth will have adequate working seatbelts for driver and all passengers.
8. Ministry designated drivers—current driving record must be free of traffic violations/tickets.
9. The driver will be required to caravan with the rest of the group unless prior permission from Sponsor/Minster has been given.
10. Only the designated driver will be allowed to drive. No substitute drivers will be allowed. (Emergency situations will be considered as the need arises. i.e. Designated driver too ill to operate vehicle, but all other conditions must be met, and this would be rare.)
11. A current signed Medical/Liability Release Form must be in the possession of the Driver for **all** occupants of the car.
12. All drivers and passengers have read and signed the **Group Heart Agreements**.
13. The above Driving Policy Agreement must be signed and kept on record by Minister.
14. Parent's must be informed of the designated driver.
15. Minister/Board must be informed of who's driving and who's riding in each car.

**I understand the responsibility involved in agreeing to be a driver for this function. I will abide by the NW Unity Driving Policy.**

Driver's Name: \_\_\_\_\_ Event: \_\_\_\_\_

Minister: \_\_\_\_\_ Date Leaving: \_\_\_\_\_ Date Returning: \_\_\_\_\_