



St. Barnabas Lutheran

 Maple Grove
Lutheran Church
A CONGREGATION OF THE ELCA



2012 ELCA Youth Gathering

citizens with the saints
Ephesians 2:14-20

Tentative Trip Dates: July 14-23, 2012

Registration closes October 2nd!

About citizens with the saints

What's the Gathering theme for 2012?

The theme, *citizens with the saints*, is drawn from the second lesson for Sunday, July 22, 2012 (Ephesians 2:14–20), paraphrased here:

Jesus is our peace. In his life and death on the cross, Jesus broke down the dividing walls so that we are no longer strangers and outsiders, but we are citizens with the saints and also members of the household of God. The foundation of God's house was built of apostles and prophets, and Jesus, the cornerstone, holds it all together.



The theme also blends the rich faith history, diverse cultures and arts of New Orleans with the communion of saints that is present whenever and wherever God's people gather!



What to Expect

What are we getting ourselves and our young people into?

The Gathering program is built around three core practices in which young people will be immersed before they come to New Orleans, while they are attending the Gathering, and again, in the communities of their congregations and synods when they return home.

The core practices — [Discipleship](#), [Peacemaking](#) and [Justice](#) — serve to accentuate God's greatest commandment: to love the Lord our God and our neighbor as ourselves (Matthew 22:34–40)

Practice Justice, Practice Peacemaking and Practice Discipleship - What is all that?

Practice Justice will be the "Service" Day. It will begin in the Superdome with "dwelling in the Word" which is bible study and worship (Learn Justice), followed by a multi-media experience reminding young people about the tragedy of Hurricane Katrina (Walk Justice), followed by boarding a bus which will take groups to their service site (Practice Justice). All will return to the Superdome where they will unpack their experiences (Reflect Justice). Lunch is included. Not all justice experiences will involve physical work. Servants of Christ do whatever other need, and that may be listening and learning.



What is the Cost?

Gathering registration	\$ <u>315</u>
Joplin Missouri	\$ <u>100</u>
Transportation	\$ <u>350</u>
New Orleans Hotel	\$ <u>300</u>
Training, Adult, Misc.	\$ <u>135</u>
Total	\$ <u>1200</u>
St. Barnabas contribution	\$ <u>200</u>
Fundraisers	\$ <u>300</u> ↑
	\$ <u>500 - 700</u>

Practice Peacemaking will be the Interaction Center Day, will begin with "dwelling in the Word" (bible study/worship) in the auditorium at the Convention Center, and then groups are free to go to the Interaction Center and/or participate in other interactive learning opportunities (i.e., workshops) throughout the building.

Practice Discipleship Day will be working together as a SYNOD. Like the other two days, this day will begin with "dwelling in the Word" lead by a team of leaders from the synod, hopefully including the Bishop. Then groups will be sent into the city of New Orleans with guidance to focus on the 7 Faith Practices.

Each day will have 1/3 of the Gathering community assigned to Practice Justice; 1/3 assigned to Practice Peacemaking and 1/3 assigned to Practice Discipleship.

The Gathering participants from St. Barnabas, Maple Grove Lutheran and Advent Lutheran will also participate in 2-3 day mission experience in Joplin, Missouri, area.

Monthly Gathering Events leading up to the Gathering - including:

- Fundrasiers (St. Barnabas & the 3 church combined)
- Fun - Fellowship Events
- Gathering Training Events



Youth Gathering 2012

*Maple Grove Lutheran, Advent Lutheran, St. Barnabas Lutheran

Medical Release & Permission Form

Dates: 7/14/12 - 7/23/12

Name of Participant _____ P Cell _____

Address _____ City _____

State _____ Zip code _____ Gender M F Date of Birth ____/____/____ Age ____ Grade ____

Parent Name(s) _____

Email Address: _____

Home Phone _____ M Cell _____ D Cell _____

Emergency Contact (other than parent)

Name _____

Home Phone _____ Cell Phone _____

Relation to Student _____

Health Insurance Information

Medical Insurance Company _____

Billing Address _____

City _____ State _____ Zip code _____

Policy # _____ Group # _____

Please indicate below any medical needs the youth staff should be aware of:

Allergies (please include insects, food and/medications)

Any illnesses (asthma, bleeding, cold, flu)

Any physical restrictions, broken bones, personality changes, mood swings or depression over the past 6 months, we should be aware of?

Authorization

I authorize my child to attend the event stated above. In the event a medical emergency arises and the emergency contact or myself cannot be reached by phone, I authorize *the three churches named above and its agents to provide for my child. I also understand that all over-the-counter medications listed on the back of sheet that I have checked can be administered by an adult staff member to my child as needed. **PLEASE CHECK MEDICATIONS ON THE BACK OF THIS FORM.** I have also read and agree with the expectations listed on the back of this form and will support Advent's staff in administering any appropriate consequences if expectations are not followed. . I understand photos may be taken and used for church purposes in accordance with the photo usage policy.

I further release *the three churches named above as well as all of its agents, members or employees, for all liability for any accident, injury or claim arising from my child's use of its facilities, transportation or participation in any of its programs. Furthermore, I take full responsibility for any financial cost, which may be incurred, for the care of my youth including emergency transportation and hospitalization. I release *the three churches named above and all of its agents from any liability for lost, stolen or damaged articles.

Parent or Guardian Signature _____ Date _____

— over —

Medications

Please complete the following portions for your child. The following over-the-counter medications may be provided by *the three churches names above in our medical kit. We will be happy to dispense any over the counter medications to your child as needed. If your child requires a different OTC medication, please feel free to bring it, **but understand that it must be collected at check in and will be disbursed to your child as needed.**

Over-the-Counter Medications:

_____ (students name)
can be administered by an adult, the following over-the-counter medication(s) for the appropriate symptoms, according to the directions stated on the medication.

- _____ Tylenol (pain/fever)
- _____ Ibuprofen (pain/fever)
- _____ Tums (indigestion)
- _____ Ny Quil (colds / fever)
- _____ Benadryl (allergy/antihistamine)
- _____ Sudafed (decongestant)
- _____ Cough/Cold, sore throat lozenges
- _____ Calamine Lotion (anti-itch cream)
- _____ Hydrocortisone cream (anti-itch cream)

Prescription Medications:

Prescription medications will be collected at the time of check in and distributed by an adult staff member as directions indicate. Exceptions are immediate response medications such as inhalers.

Child's Name _____

Date of Birth _____

Drug Name _____

Instructions for administering prescription:

Photo Release

While attending events hosted by *the three churches named above pictures are often taken. These photos become an integral part of ministry here at church. We are conscious of the society in which we live. Therefore for the safety and well being of all people involved we have adopted the following policy for all photos that are taken during youth events.

- All photos will be taken in good taste and care will be given to photo composition
- No photo will ever have a child's name attached with it
- Photos will only be used for the promotion of *the three churches named above
- Photos will be used for in house purposes. (Bulletin Boards, Presentations, Newsletters, Posters, and Wall Decoration with in the church)
- Photos appearing on the website will never have names attached and will be selected for the appropriate context
- All photos will be utilized in a manner that is age appropriate to those in the photo

It is our goal to strengthen the faith in all people involved with *the three churches named above. If you are uncomfortable with photos of your student being used in accordance with these guidelines please contact the staff member leading the event.

Student Expectations

To ensure an outstanding Christian experience for everyone, we ask that your child read and adhere to the following expectations:

- There will be no possession or use of drugs (including alcohol or tobacco) and no inappropriate activity, such as making out or hanging on one another.
- Participation in all group activities and appropriate participation in small and large group events.
- Respect group leaders, adults, peers, staff members, and facilities is expected at all times.
- Potentially harmful or dangerous behavior and weapons of any kind will not be tolerated.
- A positive attitude toward activities and others.

I, _____ (student's name) have read the expectations and I agree to abide by them. I understand that any behavior that breaks any expectation may result in disciplinary action, and which may include not being allowed to continue to participate in the event or being sent home (transportation to be determined) at my parent's expense.

Student's Signature: _____ Date: _____