

YOUTH 2000 REGISTRATION FORM

Diocese of Owensboro, Kentucky

REGISTRATION FEE: \$65.00

March 13, 6:30 p.m. - 10:30 p.m. • March 14, 9:00 a.m. ; 10:00 p.m. • March 15, 8:30 a.m. - 12:30 p.m.

- Available for youth 13-30 years of age
- **includes lunch and dinner on Saturday**
- does NOT include housing
- Financial Assistance is available for those in need

Parish/Groups/Family Groups:

Youth and Chaperones----Give your \$65 fee and this form to your parish or other group leader. **Do not send this form to the Office of Youth Ministry as your Group Leader needs this form.**

18+(those who have finished High School):

Send a \$65 check made out to Marian Shrine Committee and mail to 600 Locust Street, Owensboro, KY 42301.

Registrant Name: _____ Age: _____ Gender: F M

Address: _____

City: _____ State: _____ Zip: _____

Parent Cell Phone (_____) Parish /Group: _____

For more information, call 270-683-1545 or 270-993-3393.

LIABILITY RELEASE FORM - Release of ALL Claims

Name of Activity: YOUTH 2000 Retreat Telephone: (270) 683-1545

Location: Brescia University Campus Center Date of Activity: March 13-15, 2026

The undersigned do hereby release, forever discharge and agree to hold harmless YOUTH 2000, Inc., Brescia University Campus Center, the Diocese of Owensboro, Office of Youth Ministry, and the Marian Shrine Committee from and against any and all liability, claims, demands, lawsuits and expenses of any kind arising from personal injury, sickness, death or property damage of any kind whatsoever which may be incurred or suffered by the undersigned and/or participants (if participant is under 18, 18 or older).

The undersigned further agrees to indemnify and hold YOUTH 2000, Inc., Brescia University Campus Center, the Diocese of Owensboro, Office of Youth Ministry, Office of Faith Formation and the Marian Shrine Committee and its respective members, directors, employees, and agents (collectively, the "Indemnities") harmless from and against any and all claims, demands, actions, lawsuits, and liabilities, including attorney fees and expenses and costs sustained by the Indemnities as a result of negligent, willful or intentional acts of the undersigned and/or participant (if participant is 18 or under, 18 or older).

If participant is under 18 years of age, I (we) the parent(s) or legal guardian(s) of the participant, do hereby grant permission for our child to participate fully in the YOUTH 2000 Retreat and all of its activities and hereby give permission to YOUTH 2000, Inc., Brescia University Campus Center, the Diocese of Owensboro, Office of Youth Ministry, Office of Faith Formation and the Marian Shrine Committee to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not limited to emergency surgery and I (we) fully and completely assume all responsibility for all medical bills.

Further, should it be necessary for the participants to return home due to medical reasons, disciplinary action or otherwise, I (we) assume all responsibility and transportation cost.

RELEASE FOR PARTICIPANTS AGES 13-17

Name and signature of Parent(s) or Legal Guardian(s)

1. _____
Parent/Guardian Name (please print) _____ Signature _____ Home/cell phone _____ Date _____

2. _____
Parent/Guardian Name (please print) _____ Signature _____ Home/cell phone _____ Date _____

DESIGNATED CHAPERONE (must be 21 or older DO NOT LEAVE BLANK): _____

Parish Group or /Group Leader (if applicable, consult group leader for additional instructions): _____

***Parent/Guardian signature and phone must be provided OR FORM WILL BE RETURNED.**

RELEASE FOR CHAPERONES AND PARTICIPANTS AGES 18-30

Name (please print)

Signature

Home/cell phone

Date

Please complete other side.

TO REGISTER AND ASSURE SPACE:

1. Complete both sides of this registration form; one form per participant or chaperone.
2. Sign Liability Release (see other side). Parent/Guardian must sign for a participant age 13-17. *Forms without signatures cannot be processed.*
3. All Chaperones must have completed the Safe Environment Training required by your Diocese and have completed a current background check. If you are outside of the Owensboro Diocese please attach a letter from your parish or Diocese stating you have completed their safe environment training and background check. <https://owensborodiocese.org/safe/>
4. Give your check and form before *March 3, 2026* to your parish group or group leader.

IMPORTANT: Participants aged 13-17 must be chaperoned; see chaperone requirements below. Participants may not leave during retreat hours without written permission of parent/guardian. **NO ONE UNDER AGE 13 WILL BE ADMITTED.** Chaperones must register as participants and pay the \$65 registration fee.

EMERGENCY MEDICAL FORM
(Required by the Diocese of Owensboro)
Must be filled out completely

Allergies (especially to medicine and food), chronic conditions, and/or current medications:

If my child is in pain and if deemed advisable by a supervisory adult, I grant permission for the following non-prescription medications to be given: Acetaminophen Yes No
Ibuprofen Yes No

Medical History: _____

Medical Insurance Provider: _____ Policy # _____

Name of Insured Member: _____ Phone: _____

Doctor's Name: _____ Phone: _____

In case of **EMERGENCY** please contact:

Name: _____ Relationship to Participant: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____

**I hereby consent to the use of a photograph of my child for the purpose of publication. Yes No

CHAPERONES

Instructions for Chaperones: Every participant under 18 must be chaperoned. You must have 2 chaperones for the first 7 youth. If you are staying overnight and you have both male and female youth you need to have a male and female chaperone. A chaperone may be responsible for up to SEVEN participants. Chaperones must be age 21 or older. They must register as participants, pay the \$65 fee and sign the Liability Release. Chaperones from the Diocese of Owensboro MUST have Safe Environment Training/Background Check as set forth by the USCCB. Other chaperones outside the Diocese of Owensboro must enclose a letter from their diocese/parish confirming compliance with the sexual abuse mandates of their respected diocese.

This registration form, as well as additional information, can be found at: owensborodiocese.org/youth-2000/.