



Office for Evangelization  
Catholic Diocese of Richmond

Diocesan World Youth Day Pilgrimage 2019  
Panama | January 19 – 28, 2019

## PRIEST Pilgrim Contract

*COMPLETE THIS APPLICATION IF:  
A priest in the Catholic Diocese of Richmond.*

PILGRIM INFORMATION		
Full Name:		
Address:		
City:	State:	Zip:
Phone: (home)	(cell)	
Email:		
Parish Name:		Adult T-Shirt Size:

PASSPORT INFORMATION	
<i>COMPLETE INFORMATION EXACTLY AS IT APPEARS ON YOUR PASSPORT <u>AND</u> PROVIDE A COPY OF YOUR PASSPORT WITH THIS CONTRACT.</i>	
Passport Number:	
Surname ( <i>last name</i> ):	Date of Birth:
Given Name ( <i>first name</i> ):	Place of Birth:
Nationality:	Date of Issue:
Sex:	Date of Expiration:
<i>If no passport, then date applied:</i>	

### ACCREDITATION FOR PRIESTS

Priests are responsible for completing their own accreditation process for concelebrating at Mass with the Holy Father. The Office for Evangelization will assist with sending the letter from the Office of the Bishop on behalf of all the priests who are attending the pilgrimage, and with any other needs to help the accreditation process along.

It is assumed that priests attending the pilgrimage with youth from their parish(es) will also serve as chaperones for those youth unless that duty has been delegated to another member or employee of the parish also on the pilgrimage, and providing there is at least one adult per eight youth from your parish.

### EMERGENCY CONTACT INFORMATION (PRIMARY)

Name:

Contact Number:

Relationship to Pilgrim:

### EMERGENCY CONTACT INFORMATION (SECONDARY)

Name:

Contact Number:

Relationship to Pilgrim:

### LOCAL CONTACT INFORMATION (OPTIONAL)

Periodically throughout the pilgrimage, the Office for Evangelization will send emails to update friends and family on the status of the pilgrimage. If there are people you would like to receive these updates, please note their names and email addresses below.

Name:

Email:

Name:

Email:

Name:

Email:

Name:

Email:

### TRAVEL INSURANCE (OPTIONAL)

Our tour company, Dube Travel, offers different travel insurance options. If interested, please call Dube Travel at 1-800-TRY-DUBE to speak with Chris Dube about your travel insurance options. Due to the high cost of the pilgrimage travel insurance is strongly recommended. The best coverage is provided for \$137 (pilgrims under 30 years of age). Call Dube Travel for specific information.

# 2019 WYD PANAMA PILGRIMAGE

## Medical Information and Release Form

*All information is kept private and confidential*

Name of Pilgrim: \_\_\_\_\_

### MEDICAL INFORMATION

*In many cases, our staff and volunteers are not familiar with the medical, physical, and/or emotional history of each pilgrim. Please share **ANY** information relating to the pilgrim in detail. BE AS SPECIFIC AS POSSIBLE.*

Is the pilgrim allergic to anything?

YES  NO

List any details of allergies below (this may include food allergies, allergies to specific medications or chemicals, allergies to any substances):

Is the pilgrim currently taking or has taken any prescription medication in the last 6 months?

YES  NO

List the specific prescription medications, reasons for medication, and daily dosage. Indicate if the medication is currently being administered.

Does the pilgrim have any physical or emotional conditions?

YES  NO

List any physical or emotional conditions that may impede participation in the event. This may include counseling, treatment for emotional conditions (i.e. depression, eating disorders), and/or family situations that may have a significant impact on the pilgrim.

### RELEASE OF LIABILITY AND MEDICAL RELEASE

*I agree on behalf of myself, my heirs, assigns, executors, and personal representatives, to hold harmless and defend the Catholic Diocese of Richmond, its officers, directors, agents employees, or representatives associated with this event from any and all liability, loss or damage arising from or in connection with my participation in this diocesan event.*

*Furthermore, I hereby warrant that to the best of my knowledge, I am in good health and assume all responsibility for my health. In the event of an emergency, I hereby give permission to transport me to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor or that my emergency contact be notified prior to any further treatment. I will not hold the Diocese of Richmond responsible for authorizing any medical treatment beyond necessary transportation to the hospital.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### USE OF PICTURES AND/OR VIDEO

*I give permission for pictures and/or video of me engaged in activities related any Diocesan event related to World Youth Day to have their pictures posted in the Diocese of Richmond publications or websites. If no box is checked below, the Diocese of Richmond assumes you give permission.*

YES  NO

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# 2019 WYD PANAMA PILGRIMAGE

## Expectations and Code of Conduct

### Basic Role of Chaperones

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The Office for Evangelization staff depends on the chaperones to help serve as a network of support for the youth. It is important that the chaperones be an example of obedience and cooperation with the following policies and with the pilgrimage leaders for one another and for the youth in the diocesan delegation. Because of the physical demands of a World Youth Day pilgrimage, it is necessary that all pilgrims be in good health. World Youth Day is a very intense pilgrimage experience and can be both physically and emotionally exhausting. Because of these conditions, it is not recommended that those with significant health problems participate as chaperones.

Chaperones should be constantly assessing the youth in their group to be aware of any special needs. They should feel comfortable talking and sharing with the youth. Adults should also be willing to pray with the youth in their group. Adult Chaperones are responsible for their youth at all times, especially when traveling as a large group.

### Duties of a Chaperone

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A Chaperone's responsibilities include, but are not limited to, the following areas:

#### 1. Alcohol, Drugs, and Smoking

- ✓ All laws of the city/country concerning alcohol and drugs will be observed and enforced.
- ✓ Adults who smoke are asked to abstain during the pilgrimage. If this places an undue burden on a person, then it is expected that adults who choose to smoke will use discretion out of sight of youth pilgrims.
- ✓ The legal drinking age in Panama is 18. Adults who choose to consume alcohol should exercise prudence and discretion appropriate for a spiritual pilgrimage. Youth are *not* permitted to drink.

#### 2. Appropriate Dress

- ✓ All pilgrims are expected to dress in a fashion that represents modesty, respecting other pilgrims, and our Lord.
- ✓ Clothing must cover all undergarments and midriffs.
- ✓ The group leader and adult chaperones are expected to communicate these expectations to the youth before the pilgrimage and enforce the expectations for modesty when necessary during the pilgrimage.

#### 3. Participation

- ✓ It is expected that all pilgrims (youth, adult chaperones, group leaders) will fully participate in scheduled events during the pilgrimage.
- ✓ At no time should a youth pilgrim go somewhere alone without another youth and/or adult chaperone.
- ✓ It is to be understood that the said adult takes full responsibility for a youth once the pilgrimage has ended and everyone has left the airport.
- ✓ Drink plenty of water, get plenty of rest, and make sure to eat all meals. This will allow you to fully participate and keep up with the physical demands of the pilgrimage.

#### 4. Housing

- ✓ Youth should at no time be in the hotel room of a member of the opposite sex, unless a group meeting is occurring there.
- ✓ An atmosphere of quiet and respect is expected following the lights out time.

#### 5. Insubordination

- ✓ It is expected that youth and adults will follow the direction of the group leader and travel guides.
- ✓ Any instances of lack of cooperation or insubordination will not be tolerated and will be subject to appropriate discipline.
- ✓ The first and primary method of dealing with discipline problems will be to work through the group leader.

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*I have read, understand, and agree to the above policies and principles. I will ensure that anyone accompanying me on this pilgrimage also understands and agrees to these policies. I understand that any violation of the above principles may result in dismissal from the Diocesan World Youth Day Pilgrimage and forfeiture of all payments.*

Signature

Date

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Printed Name

# 2019 WYD PANAMA PILGRIMAGE

Contract for \_\_\_\_\_ (name)

## FINAL PRICE AND DATES

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The pricing has been finalized at \$2,999.00 per pilgrim. No spot can be guaranteed until this contract and a nonrefundable initial deposit of \$250 is received.

## INCENTIVIZED PRICING FOR PILGRIMS

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Those eligible for the incentivized pricing are:

- Pilgrims who are registered parishioners in the Diocese of Richmond
- Pilgrims who participate in a Diocese of Richmond Campus Ministry program

The funding for this incentive comes directly from our Diocesan Annual Appeal monies allocated to support youth and young adults in the Diocese of Richmond.

All pilgrims are eligible for a discount off the total cost of the pilgrimage as follows:

- Initial deposit and signed contracted postmarked by August 31, 2018 \$500 discount
- Initial deposit and signed contracted postmarked on or after September 1, 2018 No discount

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## SECTION A

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## RESERVATIONS AND PAYMENT SCHEDULE

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Your total payment due is \$2,999.00. By continuing with the pilgrimage, you agree to be responsible for paying the Catholic Diocese of Richmond the full amount of \$2,999.00. This remaining amount should be paid according to the schedule outlined for you below. For any cancellations from this point forward the remaining funds due will still apply until you have paid in full the \$2,999.00 including any scholarships or incentives received.

Payment Schedule	
August 31, 2018	\$250.00
October 1, 2018	\$1000.00
December 1, 2018	\$1000.00
January 15, 2019	\$749.00**

\*\*Remaining balance due

### Instructions for payment by check:

Make checks payable to *Catholic Diocese of Richmond*.

Send payments to: Office for Evangelization, Catholic Diocese of Richmond, 7800 Carousel Lane, Richmond, VA 23294

### Instructions for payment by credit card:

Visit [www.evangelizerichmond.org](http://www.evangelizerichmond.org) and download the Credit Card Authorization Form.

Complete this form and return to the Office for Evangelization at the above address.

**Conditions and Cancellation Fees**

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As stated above, the initial deposit will be non-refundable. Due to the close date of World Youth Day this year, no refund of any amount paid will be made to any Participant. For these reasons, travel insurance is highly recommended. All cancellations must be submitted by Participants to Dube Travel in writing. No refund will be made for any unused portion of the tour unless agreed to in writing prior to departure of the tour.

Once participants make an initial deposit and complete the WYD application, they are responsible for the total amount of the pilgrimage even if they cancel or do not show up for the pilgrimage for any reason.

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**SECTION B**

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**CONDITIONS**

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*By signing below, I agree to the full payment of \$2,999.00 as outlined above including any scholarships or incentives received. I acknowledge that I have read, understand, and agree to uphold the code of conduct agreement completed in the original contract. I understand that I will be held financially liable for the full cost of the pilgrimage. I understand that cancellations will only be valid if received in writing. No cancellations will be accepted over the phone. Cancellation notices should be sent directly to: Office for Evangelization, Catholic Diocese of Richmond, 7800 Carousal Lane, Richmond, VA 23294.*

*I understand that the Catholic Diocese of Richmond reserves the right to deny application, or request the ejection of any group or individual who does not comply with the regulations and policies for the Catholic Diocese of Richmond delegation to World Youth Day 2019 in Panama. In the event that a person is ejected, no refund will be made. Furthermore, I understand that the Catholic Diocese of Richmond and/or Dube Travel have the right to adjust the terms of this contract if conditions change, and that if this happens all pilgrims will receive full notice of any changes with a contract addendum to be signed and returned.*

*I understand that Dube Travel Agency, Inc., and representatives of Dube Travel act only in the capacity of agents for the tour participants from the Catholic Diocese of Richmond and for the various vendors including airlines, transportation companies, hotels, sightseeing, restaurants contractors and all other individuals performing duties as specified in the proposal and tour flyer. Dube Travel will exercise reasonable care in making arrangements, however, does not assume any liability whatsoever for any injury, damage, loss, accident or delay to person or property. The tickets and contracts in use by any carrier, hotel, or other contractor rendering services shall constitute the sole contract between such contractor and the tour member. No refund will be made for any unused portion of the tour unless agreed to in writing prior to departure of the tour. The right is reserved to decline to accept or retain any person as a member of the tour at any time. The right is reserved to change or cancel itineraries, substitute services with or without notice where deemed necessary. The issuance and acceptance of tickets and tour documents shall be deemed to be consent to the above conditions. The air carrier and all other transportation vendors shall not be held responsible for any act, omission, or event during the time passengers are not on board its own conveyance.*

\_\_\_\_\_  
Pilgrim Signature Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Parent Signature (if required) Date

\_\_\_\_\_  
Printed Name

**Certificate of Acknowledgement:**

City/County of \_\_\_\_\_ in the Commonwealth of Virginia

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_, 20 \_\_\_\_ by \_\_\_\_\_. (name of person seeking acknowledgement)

Notary Public \_\_\_\_\_

Notary Registration Number \_\_\_\_\_

My commission expires \_\_\_\_\_

**Notary Seal:**