



Office for Evangelization
Catholic Diocese of Richmond

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

YOUTH Pilgrim Contract

COMPLETE THIS APPLICATION IF:

At least 16-years-old by time of departure AND currently enrolled in high school or home school

PILGRIM INFORMATION

Full Name:		
Address:		
City:	State:	Zip:
Phone: (home)	(cell)	
Email:		
Parish Name:	Parish Leader:	
Grade (as of 2018 – 2019 School Year):	Adult T-Shirt Size:	

PASSPORT INFORMATION

COMPLETE INFORMATION EXACTLY AS IT APPEARS ON YOUR PASSPORT AND PROVIDE A COPY OF YOUR PASSPORT WITH THIS CONTRACT.

Passport Number:	
Surname (last name):	Date of Birth:
Given Name (first name):	Place of Birth:
Nationality:	Date of Issue:
Sex:	Date of Expiration:
<i>If no passport, then date applied:</i>	

PARENT / GUARDIAN INFORMATION

Name: _____ (Father) _____ (Mother)

Cell Phone: _____ (Father) _____ (Mother)

Email: _____ (Father) _____ (Mother)

EMERGENCY CONTACT INFORMATION

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.

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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

As parent and/or legal guardian I remain legally responsible for any personal actions taken by the above named minor. I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend the Catholic Diocese of Richmond, its employees and agents, chaperons, or representatives associated with this event from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the Diocese, its employees and agents and chaperons, or representatives associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the Diocese.

I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child. In the event of any emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers I give permission for the noted emergency contact to be notified. I will not hold the Diocese of Richmond responsible for authorizing any medical treatment beyond necessary transportation to the hospital.

Parent/Guardian Signature: _____ Date: _____

USE OF PICTURES AND/OR VIDEO

I give permission for pictures and/or video of my child (named above) engaged in activities related to any Diocesan event related to World Youth Day to have their pictures posted in the Diocese of Richmond publications or websites. Names of pilgrims **will not** be used without expressed permission from the parent or guardian. If no box is checked below, the Diocese of Richmond assumes you give permission.

YES NO Parent/Guardian Signature: _____ Date: _____

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Expectations and Code of Conduct

Responsibilities of a Youth Pilgrim

Responsibilities of a youth pilgrim include, but are not limited to, the following areas:

SHOW LOVE AND RESPECT FOR GOD:

- ✓ Pray daily for self and others.
- ✓ Participate in opportunities to receive the Sacraments.
- ✓ Participate in the sessions, activities, and prayer experiences.
- ✓ Be open, flexible, and have a servant's attitude.
- ✓ Represent God in your words and actions.

SHOW LOVE AND RESPECT FOR SELF:

- ✓ Remember that you are the Temple of the Holy Spirit. Present yourself accordingly.
- ✓ Dress with modesty. Bare mid-drifts, spaghetti straps, short-shorts, low cut tops, or guys without shirts are not modest dress.
- ✓ Any music you bring and listen to should glorify God.
- ✓ 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.
- ✓ If you must leave an activity, adult chaperones should accompany you since they are responsible for you.

SHOW LOVE AND RESPECT FOR OTHERS:

- ✓ All words and actions should be those of Christ to build up others and not injure.
- ✓ Make sure that your actions during the activities do not distract others from hearing, seeing, or praying.
- ✓ Fully participate in scheduled events during the pilgrimage.
- ✓ Be safe. No horseplay or other potentially harmful actions. At no time should a youth go somewhere alone without another youth and/or adult chaperone.
- ✓ Youth should at no time be in the hotel room of a member of the opposite sex, unless a group meeting is occurring there.
- ✓ Observe an atmosphere of quiet and respect during evening hours when hotel guests are sleeping.

OTHER INFORMATION:

- ✓ Any damages caused by the pilgrim will be charged to the pilgrim.
- ✓ The legal drinking age in Panama is 18. All laws of the city/country which we are in concerning alcohol, tobacco, and drug use will be observed and enforced. Youth are *not* permitted to drink alcohol.
- ✓ It is expected that youth and adults will follow the direction of the group leader and travel guides.

I have read, understand, and agree to the above policies and principles. 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.

Youth Signature

Date

Printed Name

Parent Signature

Date

Printed Name

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Contract for _____ (name)

FINAL PRICE AND DATES

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

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

SECTION A

RESERVATIONS AND PAYMENT SCHEDULE

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 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

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.

SECTION B

CONDITIONS

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 Carousel 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: