

Put this on your refrigerator!

FACT SHEET

LEFTY's Fall Conclavette

Location:	Temple Isaiah, 55 Lincoln Street, Lexington, MA 02421
Date:	November 7-9, 2008
Time:	Arrive at Temple Isaiah between 4:30 pm and 5:00 pm on Friday, November 7 Depart from Temple Isaiah at 11:30 am on Sunday, November 9
Bring:	Sleeping bag, pillow, personal items, etc. – anything you might need for a weekend away Semi-formal attire for Saturday evening (no jeans) Cans of tomato products and/or rice as a Jewish Family Table* Donation <i>*JF&CS Family Table, Greater Boston's Kosher food pantry, provides healthy, nutritious food on a monthly and emergency basis to individuals and families in need. We are presently serving almost 400 families in need who are identified by rabbis, religious school directors and social workers.</i>
Housing:	All participants will be housed by Temple Isaiah families and members
Cost:	\$50.00 (checks payable to your temple youth group).
Deadline:	Completed <u>application</u> , <u>health and safety form</u> , and <u>money</u> are due to your Advisor no later than <u>Sunday October 19th!!!</u>
Questions:	Contact your Advisor or... LEFTY President: Holly Bodony (781) 454-8458 or hbodony@gmail.com LEFTY Advisor: Alicia McGee (781) 862-7160 or amcgee@templeisaiah.net
Emergencies During the Event:	Alicia McGee: (908) 578-6506 (cell) Emily Messinger: (617) 271-3256 (cell)

LEFTY's Fall Conclavette

November 7th-9th, 2008

The following items must be returned to your TYG advisor by **October 10th, 2008** in order for your application to meet LEFTY's deadline:

This Application Form Code of Conduct signed by parent & participant Payment of \$50.00 payable to your TYG.

Name _____ Male Female Grade _____ TYG _____
Last First
Address _____
City _____ State _____ ZIP Code _____
Food choice: Regular Vegetarian Vegan Kosher Lactose Free

CONTACT INFORMATION

Parent/Guardian Name _____ Contact Phone _____
Last First

Parent/Guardian Name _____ Contact Phone _____
Last First

Provide an additional emergency contact below in case parents cannot be reached.

Name _____ Relationship _____ Phone _____
Last First

MEDICAL INFORMATION

Doctor's Name _____ Phone _____

Medical Insurance Company _____ Policy Number _____

Medication Allergies _____

Environmental Allergies _____

Medications to be taken during event _____

Medications to be taken as *needed* during event _____

Date of most recent tetanus booster _____

Any information you feel we should know in order to insure the most successful experience possible?

No Yes (If yes, please describe) _____

HOUSING Requirements

Housing requests are not guaranteed. We'll do the best we can to fill one of your requests. You may provide up to two requests, listing by name & TYG. Per NFTY-NE rules, there will be no coed housing.

There will be no switching of housing assignments once the event starts

1. _____ TYG _____

2. _____ TYG _____

Any allergies that would affect your housing (e.g. pets) _____

AUTHORIZATION

All information, INCLUDING HEALTH HISTORY, provided on this form is correct. As a parent/guardian, I give my permission for my child to engage in all prescribed activities except as noted above. I release URJ, NFTY-NE, LEFTY and Temple Isaiah of Lexington, MA and its agents from all responsibilities other than those directly related to Fall Conclavette. In the event that I cannot be reached in an emergency, I authorize the physician selected to provide care as necessary for the participant named above.

Parent/Guardian Signature _____ Date _____

TYG Advisor Signature _____ Date _____

B'RIT K'HILAH – Code of Conduct

ברית קהילה

I will promote the creation of a religious youth community based on mutual respect and a sense of personal well-being. I will treat others with kavod (honor and respect) because we are created b'tzelem Elohim (in the image of God). I have read the following rules, designed to promote the health and safety of all event participants, and have indicated my complete acceptance by my signature and that of my parent/guardian.

- I will not possess, consume, distribute, or be under the influence of alcoholic beverages, other than that served by adult leadership for Jewish sacramental purposes, even if I am of legal drinking age.
- I will not possess, use, distribute, or be under the influence of any illegal drug or drug paraphernalia.
- I will not smoke or consume or distribute tobacco products at any time during the event.
- I will attend and participate fully in the entire event, unless otherwise agreed upon with the NFTY Regional Advisor.
- I will arrive on time, stay until the end, and remain on the event premises at all times.
- I will not bring or use any weapons, firearms, or anything that may be construed as a weapon.
- I will not commit any illegal act. I understand that vandalism, disturbing the peace, or other inappropriate behavior as determined by the adult leadership in accordance with the youth leadership will not be tolerated. I understand that I will have to pay for any damage that I cause. I understand that no gambling is allowed, except for fundraisers approved by the adult leadership.
- I will abide by the event curfew announced by the leadership. After each event session, I will go directly to my cabin, hotel room, or host home and remain there until the next session.
- I understand that no guests are allowed at any event, unless the adult leadership grants permission in advance, and that any unauthorized guests will be asked to leave immediately.
- I will not drive to, during, or from events, unless advance permission for a special situation is requested in writing by my parent/guardian and granted in writing by the NFTY Regional Advisor. This includes driving to/from my home to meet NFTY's designated transportation.
- I will not participate in any activities that could be deemed as hazing, sexually harassing, demeaning, or hurtful.
- I agree to refrain from inappropriate sexual behavior.
- I agree to abide by any additional rules, pertinent to a specific event, which may be announced, and to accept the consequences of their violation.

I understand that these rules of behavior apply from the time I leave home for the event, during the event itself, and until I return home after the event.

We understand that part of the Fall Conclavette experience involves activities, group living arrangements and interactions that may be new to my child. These things come with certain risks and uncertainties beyond what my child may be used to dealing with at home. I am aware of these risks, and I am assuming them on behalf of my child. I realize that no environment is risk free and so I have instructed my child on the importance of abiding by this B'rit K'hilah—Code of Conduct. My child and I both agree that he or she is familiar with these rules and will obey them. We further understand that sanctions imposed by the NFTY Regional Advisor for violation could include immediate expulsion from the event, at the expense of the parent or guardian.

My signature, and the signature of my parent/guardian, on the attached Application for Fall Conclavette, affirm my agreement to the rules and policies of NFTY, Temple Isaiah of Lexington and this B'rit K'hilah.

Signature _____ Date _____

Parent Signature _____ Date _____