

REGISTRATION - COREX 2019

AUGUST 11, 12 & 13

This is your registration form. Please read it carefully and PRINT the requested information on BOTH SIDES. The total cost for COREX is \$150. Please make checks payable to **Catholic Central**. You can drop off or mail this form to the Catholic Central Main Office.

NAME _____ MALE _____ FEMALE _____
ADDRESS _____
CITY _____ ZIP _____ HOME PHONE _____
PARISH (CHURCH) _____ STUDENT EMAIL (print) _____

STUDENT COMMITMENT

In making this application, I agree to cooperate in making this year's COREX (Community Religious Experience) a success by participating in the scheduled sessions, by respecting and supporting my classmates to the very best of my ability, and by abiding by the rules. (COREX rules include the following: Immediate dismissal will result from the use or possession of tobacco, drugs, alcohol, or any type of combustible or noise-making devices. Violation of cabin expectations, swimming safety rules, or acceptable Christian standards of behavior can also result in dismissal.)

Signature of Student _____ Date _____

PARENTAL PERMISSION AND COMMITMENT

We are trying to encourage your daughter/son to grow in Christian community relationships and experience God's love in His people. We will promise to care for your child as if he/she is our own -- protecting, safeguarding, physically as well as spiritually, helping each one to become an adult Christian.

A letter explaining the Parent Involvement options of Staffing and Cooking options has been sent home this week. Additionally, you could sign up on this sheet to support and encourage your child and the staff in the following ways:

- _____ *Supply baked goods (or other snacks) for COREX (one batch of cookies, brownies, rice krispie treats)*
- _____ *Participate in an hourly, continuous prayer during the weekend by signing up for a time to pray for the class*
- _____ *Provide a scholarship (\$150) or other donation to help any student unable to afford participation*

Parent Cell Phone: _____ Work Phone _____

INSURANCE COMPANY _____ GROUP # _____

(or include a photocopy of insurance card)

Medical Problems/ Allergies _____

Dietary Restrictions or Concerns: _____

I approve my daughter's/son's application for COREX (Community Religious Experience). I am willing, if necessary, to pick up my student at any time, should he/she fail to obey the rules.

Signature of Parent/Guardian _____ Date _____

FEES

A deposit of \$75 (applied towards the \$150 total) is required for each registrant. Registration and deposit should be handed in by June 1, 2018. The entire \$150 may be paid at this time.

Please send to **COREX c/o Catholic Central High School, 319 Sheldon Blvd. S.E., Grand Rapids, MI 49503**. Any problems relating to either total cost or deposit should be addressed to **Mrs. DeYoung (233-5820)** or email to **krisdeyoung@grcatholiccentral.org**. **FINANCIAL HELP IS AVAILABLE.**

Please make checks payable to Catholic Central High School.

I, _____, the parent/guardian of _____
(Name of Parent/Guardian) (Name of Student)

in consideration of my request to allow this child the opportunity to participate in COREX on August 11, 12 & 13, agree to assume all responsibility and expense associated with the field trip.

I have made the school aware of any medical condition of this child that may have an impact on his/her participation in this field trip. I grant to the school, its agents, employees, and representatives my permission to seek emergency medical attention for this child if, in their judgment, such attention is warranted and I am not immediately available to grant such permission. I agree to be in all ways responsible for any and all expenses associated with any and all medical care furnished to this child.

The school has sufficiently explained the nature, extent, and requirements of this field trip and I am aware of and accept the associated risks of participation in this field trip. I agree to release and hold the school and the Diocese of Grand Rapids and their agents, employees, and representatives, forever harmless and indemnified against and from any and all liability, loss, damages, costs, claims, and/or causes of action, including but not limited to all bodily injuries and property damages, and including any legal fees in defending such claim, resulting from, arising out of, or during, or in any way connected with this field trip. I also agree to release and hold the school and the Diocese of Grand Rapids and their agents, employees, and representatives, forever harmless and indemnified against and from any and all claims or right of action for damages which my child has or hereafter may acquire either before or after the child has reached majority, including but not limited to all bodily injuries and property damages, and including any legal fees in deferring such claim, resulting from, arising out of, or during, or in any way connected with this field trip.

Signature of Parent/Guardian

Date