2016 St. Nicholas Greek Orthodox Cathedral

“New Youth Ministry Worker Packet”

Process for *New Youth Ministry Workers*:

- Completed packet turned into the church office by Nov. 15, 2016
- Level 2 Background Screening
- Priests’ review of packet & screening
- Notification by ECYDC to Youth Ministry leader & volunteer to begin working with youth

St. Nicholas Greek Orthodox Cathedral

Tarpon Springs, Florida

Youth Ministries and Catechetical School Volunteer Application

APPLICATION DATE: _____

MINISTRIES VOLUNTEERING FOR: _____

DATE AVAILABLE: _____

APPLICANT INFORMATION

Name: _____
Last First Middle

Home Address:_____

City, State, Zip _____

Date of Birth:_____

Home Phone:_____ Cell Phone:_____

Email Address:_____

EMERGENCY CONTACT INFORMATION

Person to be contacted in case of emergency:_____

Emergency Contact Phone Number: _____

Relationship of Emergency Contact Person: _____

VOLUNTEER EXPERIENCE

Have you ever been a volunteer at St. Nicholas? (Circle one) YES NO

If yes, please provide volunteer experience including, dates, ministries, responsibilities, and any duties involving working with or around children:_____

_____

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

PERSONAL HISTORY

Do you have a valid Florida Driver's License? (Circle one) YES NO

Driver's License Number:_____

Expiration Date:_____

Has your license ever been suspended or revoked? (Circle one) YES NO

Have you ever been arrested? (Circle one) YES NO

If yes, please provide details as follows:

Date of arrest Charge Disposition

1. _____
2. _____
3. _____

Are you currently on, or have you ever been on court ordered probation? (Circle one) YES NO

If yes, please provide details:_____
_____
_____
_____
_____
_____

PERSONAL REFERENCES

Please provide the names, addresses, and telephone numbers of three personal references.

Name Address Phone Number

1. _____

2._____

3._____

TELL US ABOUT YOURSELF (Please feel free to use addition paper if necessary)

Are you an Orthodox Christian? (Circle one) YES NO

Are you a steward of St. Nicholas Cathedral? (Circle one) YES NO

How often do you attend church? (Circle one) Often Somewhat Often Rarely

What special qualities or qualifications would you contribute as a volunteer staff member?

_____
_____
_____
_____
_____

Why do you want to be a volunteer within the St. Nicholas Greek Orthodox Community?

_____
_____
_____
_____
_____
_____
_____

IF APPLICANT OR VOLUNTEER IS UNDER THE AGE OF EIGHTEEN, A PARENT OR GUARDIAN'S SIGNATURE IS REQUIRED

Please read carefully before signing

I understand that my signature on this application signifies that the information provided by me is true and accurate. I also understand that any information found to be intentionally inaccurate, misleading or untrue is immediate grounds for no further consideration or grounds for immediate dismissal. I also understand that you may be requesting and examining public records related to my application for employment or volunteer service. This may include, but not be limited to, driving records and criminal history information.

Print Name:_____

Signature:_____ Date Signed:_____

Parent or Guardian Signature:_____Date Signed:_____

Background Check Completed: YES NO

Date Completed: _____

Completed by: _____

NOTE: Copy of current Driver's License and Health Insurance Card (front and back) to be turned in with completed application.

Interview with priest (Optional or as determined by parish clergy)

Comments: _____

_____

_____

_____

_____

Approved Disapproved

Date: _____ Signature:_____

Covenant for Youth Ministry Volunteer

Name: _____

- ◊ I am an Orthodox Christian and will attend Church regularly.
- ◊ I understand that it is a blessing to serve my community, to serve the youth and their families and to be the positive role model of an Orthodox Christian.
- ◊ I will participate in all activities throughout our Church's Ministry Year.
- ◊ I will be held personally responsible for my actions. I will respect all property including Church, housing, athletics, outdoor and indoor facilities whether at my home parish or any host parish event facility. I will refrain from using offensive language, alcohol, and illegal drugs, especially at Church Events.
- ◊ I understand that if my behavior is not becoming of an Orthodox Christian, I will be asked to leave any event even at my own expense.
- ◊ I will respect all Clergy, all advisors, all adults, other youth participants and myself.
- ◊ I agree to follow the Archdiocesan Youth Protection Plan and understand that there is a copy in the Parish office for my review.
- ◊ I have read the above covenant and will follow them to the best of my ability.
- ◊ I understand that the failure to comply with this covenant and all rules of event will result in a meeting with the Priest of my Parish to discuss my participation in future Church events.

I agree to this covenant and will follow the above rules and the rules and each event I attend throughout the year.

Signature of Youth Ministry Volunteer: _____
Date: _____

Chaperone Registration Form

Youth Ministry Volunteer Name:
_____

This form is required for all field trips, retreats, conferences, over-night stays. The opportunity to work with our youth is a position of privilege that may only be by those individuals who demonstrate behavior consistent with this responsibility. **Applicants must have previously completed a Volunteer Form and been approved by the Education, Culture, and Youth Diakonia Committee** prior to completing this form and as a prerequisite to being eligible for consideration for approval as a chaperone.

Chaperone Responsibilities:
(Specific instructions to be provided by group for when you are chaperoning)

1. Chaperones will be assigned small groups of children for whom they will be responsible at all times. Chaperones will know the whereabouts of each child at all times. Children must never go anywhere unsupervised. Chaperones will stay with the same group of children throughout the entire field trip. Chaperones must accompany children to the restrooms. Individual chaperones must never be alone with only one child.

2. Chaperones (and children) must be at the departure location and ready to leave at the designated time.

3. Chaperones will be assigned children for whom they will be responsible. The assignment of children is not subject to review, negotiation or change. The ministry advisor in charge of the field trip will maintain emergency, medical and other information for all children on the trip. Chaperones must be aware of any medical issues with the children in their care.

4. Chaperones must have a cellular phone and will provide their cellular phone number to the ministry advisor in charge of the field trip.

5. Chaperones will cooperate with and otherwise support the ministry advisor in charge of the field trip.

I have read and agree to all terms of St. Nicholas Greek Orthodox Cathedral Chaperone Registration Form.

Signature: _____ **Date**: _____

This following is for Ministry Leaders and ECYDC Purpose Only

Name of Applicant: _____
(Please Print)

Please select one:

☐ **Recommend strongly**

☐ **Recommend with reservation**

☐ **Do not recommend**

Signature of Ministry Leader: _____ **Date:** _____

ECYDC Approval: Yes ☐ No ☐

Approval Date: _____

ECYD Committee Signature: _____**Date:** _____

Signature of Parish Priest: _____**Date:**_____

Participant's Name:_____

ST. NICHOLAS CATHEDRAL WAIVER AND COMPLETE RELEASE OF LIABILITY, MEDICAL TREATMENT AND PHOTO AUTHORIZATION

In consideration of the ST. NICHOLAS GREEK ORTHODOX CATHEDRAL, INC. (which entities, together with all of the ministries and facilities that comprise a part of the Greek Orthodox Metropolis of Atlanta, are collectively defined herein as the "Church") furnishing or making available services, property, camp site, housing, transportation, supervision, activities, resources, supplies, travel to/or from functions or events, programs and equipment to enable the undersigned participant (the "Participant") to participate in Church religious, social, cultural, athletic or other activities, services, programs and events (collectively, the "Church Events"), and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the undersigned Participant and the undersigned legal Guardian of Participant, on behalf of themselves, and their respective children, representatives, executors, heirs, beneficiaries and successors (all of the foregoing being collectively defined as the "Undersigned") fully and unconditionally agree as follows:

I. The Undersigned fully understand, acknowledge and agree that:

(a) all indoor or outdoor Church Events have inherent risks, dangers, hazards and exposures (collectively defined as the "Dangers");

(b) participation in Church Events and/or use of Church owned, borrowed or leased equipment, facilities, real or personal property, buildings, or spiritual, residential or recreational items, properties or equipment (collectively defined as the "Church Property and Equipment") may result in injury, illness, sickness, disease, strains, breaks, fractures, partial and/or total paralysis, death or other ailments or injuries that could cause serious disability (all of the foregoing being collectively defined as the "Injuries");

(c)these Dangers or Injuries may be caused by: (i) accidents, the forces of nature, foreseeable or unforeseeable causes, or other causes; or (ii) the actions, omissions or negligence of other participants in Church Events or other individuals or entities; or (iii) the actions, omissions or negligence of any Church Youth Director,, Church Event chaperons or leaders, clergy or other Church Council members, parishioners, agents, subcontractors, officers, volunteers or employees of the Church (all of the foregoing individuals being collectively defined as the "Church Officials"); and

(d)by the participation by any of the Undersigned in Church Events or use of Church Property and Equipment, the Undersigned hereby assume all risks and Dangers and all responsibility for any and all Injuries, Dangers, losses and damages, which occur or arise there from, whether caused in whole or in party by the actions, omissions or negligence of any of the Church Officials, the Church or any other person or entity.

II. The Undersigned Participant and Guardian, on behalf of all of the Undersigned, including their respective children, representatives, heirs, beneficiaries and successors, hereby voluntarily release, waive, discharge, hold harmless, defend and indemnify the Church, and all Church Officials, from any and all Injuries, Dangers, lawsuits, other proceedings, claims of any kind, actions or losses of any kind, including without limitation those for bodily injury, Injuries, property damage, wrongful death, loss of services or otherwise, which might arise out of use of the Church Property and Equipment or participation in, or travel to any Church Events or Church Property and Equipment. THE UNDERSIGNED SPECIFICALLY UNDERSTAND AND AGREE THAT THE UNDERSIGNED ARE RELEASING, DISCHARGING AND WAIVING, WITHOUT LIMITATION, ANY CLAIMS OR ACTIONS THAT THE UNDERSIGNED MAY HAVE PRESENTLY OR IN THE FUTURE FOR THE NEGLIGENCE, ACTIONS, OMISSIONS OR OTHER CONDUCT BY CHURCH OR ANY OR ALL OF THE CHURCH OFFICIALS IN CONNECTION WITH CHURCH EVENTS OR CHURCH PROPERTY AND EQUIPMENT.

III. The Undersigned also hereby represent that the Participant is in good physical and mental condition and is capable of participating in outdoor and indoor recreational activities and programs all without incident or problem of any kind, including, but not limited to, swimming, diving, boating, ropes courses, climbing activities, basketball, volleyball and other sports and adventure activities. The Undersigned accept all responsibility for Participant's physical well being and health and the results of the Undersigned's participation in any such activities or Church Events.

V. THE UNDERSIGNED HAVE READ THIS WAIVER AND RELEASE AND BY SIGNING IT AGREE THAT IT IS THE UNDERSIGNED'S INTENTION TO FULLY AND COMPLETELY RELEASE, EXEMPT, RELIEVE AND HOLD HARMLESS THE CHURCH AND ALL CHURCH OFFICIALS FROM ANY LIABILITY OR OTHER

CLAIM OF ANY KIND FOR ANY INJURIES, DANGERS, PERSONAL INJURY, PROPERTY DAMAGE, OR WRONGFUL DEATH CAUSED BY NEGLIGENCE, ACTIONS, OMISSIONS OR OTHERWISE IN ANY WAY RELATED TO CHURCH EVENTS OR CHURCH EQUIPMENT.

VI. Any Church Official may seek whatever medical attention or treatment he or she believes the Participant may need, including, without limitation, having them see a doctor or other professional at a hospital, clinic, other medical facility or at Church Events (collectively defined as the "Medical Professionals"), and any Medical Professionals may treat the Participant and provide whatever medical attention or treatment they believe the Participant requires or could benefit from (the "Medical Treatment").

VII. The Undersigned Guardian and Participant (if of legal age) will remain completely financially responsible and liable (regardless of whether or not he or she has insurance) for any and all costs, fees or expenses associated with any such Medical Treatment, and the Guardian and Participant (if of legal age) will promptly reimburse and indemnify the Church, any Church Official and/or the Medical Professionals for any costs, fees, expenses or claims of any kind they may incur in obtaining such Medical Treatment for the Participant; provided, however, that nothing herein shall obligate the Church or Church Official to incur any such costs, fees or expenses or seek such Medical Treatment, and nothing herein shall supersede, limit or conflict with any Waivers, Releases or Hold Harmless Agreements that may be executed in favor of any of the Church or any Church Officials in this or any other document.

VIII. Representatives and authorized contractors of the Church are hereby authorized to take and record photographs, videotape or other images, and or make audio, video or other recordings, of Participant and Participant's activities at or involvement in Church Events, or using Church Property and Equipment, solely for use by the Church in its brochures, newsletters, video tapes, recordings, web sites and other promotional material or items to promote the Church or Church Events, all without any remuneration to Participant, Guardian or the Undersigned

Participant's Name_____

All of the above provisions are accepted and agreed to as of: _____(date)

"UNDERSIGNED"

Participant's Signature

Participant's Address

Participant's Printed Name

State

Home Phone

Cell Phone

Guardian's Signature
(if Participant is less than 18 years old)

Guardian's Address (if different)

Guardian's Printed Name

State

Home Phone

Other Phone

In case of emergency, you may contact:

NAME:

ADDRESS:

CITY: STATE ZIP:

Home Phone Cell Phone: Work Phone

EMAIL

ST. NICHOLAS GREEK ORTHODOX CATHEDRAL

2016 STEWARDSHIP COMMITMENT

METROPOLIS OF ATLANTA

"AS SOON AS THE COMMANDMENT WAS CIRCULATED, THE CHILDREN OF ISRAEL BROUGHT IN ABUNDANCE THE FIRSTFRUITS OF GRAIN AND WINE, OIL AND HONEY, AND OF ALL THE PRODUCE OF THE FIELD; AND THEY BROUGHT IN ABUNDANTLY THE TITHE OF EVERYTHING."
2 CHRONICLES 31:5

Sal _____ First Name_____ Middle Int. ____ Last Name_____

Birth Date ___ / ___ / ___ Have you been confirmed in the Orthodox Faith? Y / N Baptismal Name_____

Email Address_____ Phone_____ Occupation_____

Address _____ City _____ State _____ Zip _____

FAMILY INFORMATION

Spouse First Name_____ Middle Int. ____ Last Name_____

Birth Date ___ / ___ / ___ Have you been confirmed in the Orthodox Faith? Y / N Baptismal Name_____

Email Address_____ Phone_____ Occupation_____

Child's Name_____ Baptismal Name_____ Birth Date ___ / ___ / ___

Child's Name_____ Baptismal Name_____ Birth Date ___ / ___ / ___

Child's Name_____ Baptismal Name_____ Birth Date ___ / ___ / ___

Children 18 years and older must each submit separate stewardship form. Additional children under 18 may be included on separate sheet

STEWARDSHIP PLEDGE AMOUNT _____ PER YEAR / _____ PER MONTH

Method of payment. Check one:

_____ Online via PayPal - go to www.stnicholastarpon.org/stewardship for link

_____ Check - please enclose your first payment with this form and mail remaining payments to the parish office

_____ Monthly credit card payments _____ Visa _____ Master Card _____ Discover _____ American Express

Name as it appears on card _____ Signature _____

Card Number _____ Expiration date _____ / _____ Sec. Code _____

What are your gifts? Where can you dedicate your time and talents? Check all that apply:

____ Epiphany Celebration	____ Pre- School	____ Choir	____ HOPE/JOY
____ Welcome Committee	____ Greek School	____ Youth Choir	____ GOYA
____ Festival	____ Sunday Church School	____ Prosfora Baking	____ Young Adult Leaders
____ Stewardship	____ Bible Study	____ Altar Servers	____ Youth/Adult Basketball
____ Office Support	____ Greek Dance Ministry	____ Narthex Servers	____ Scouting
____ Bookstore	____ Soup Kitchen	____ Philoptochos	____ Transportation Help