

NOTRE DAME. VISION

Summer 2019 Application for Campus & Youth Ministers

For Office Use Only

Paid: _____ Due: _____

Preferred Session Please rank possibilities in order of preference from first to last (#1-4). Selecting a session indicates you will attend the entire session which runs from 5pm Monday through 12:30pm Friday. If your first option is not available, we will contact you to ask for your permission before enrolling you in another session.

_____ (i) June 17-21 _____ (ii) June 24-28 _____ (iii) July 8-12 _____ (iv) July 15-19

Personal Information

Last Name: _____

First Name (for name tag): _____

Home Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Cell Phone #: _____

Email Address: _____

Birth Date (mm/dd/yyyy): _____

Sex: Female Male

T-Shirt Size:

Small Medium Large

X-Large XXL 3XL

Religious Affiliation (Optional): _____

Are you the Group Organizer for a group of high school participants?

Yes No

Are you attending with young people from your parish, school or diocese?

Yes No

If you are associated with a Group Organizer (for youth participants), please list their name here: _____

Emergency Information

Emergency Contact Person: _____

Relationship to Participant: _____

Daytime Phone #: _____

Evening Phone #: _____

Dietary Restrictions _____

Allergies and/or Medical Needs: _____

Ministerial Information

Place of Ministry: _____

Ministry Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Ministry Phone #: _____

Arch/Diocese: _____

Primary Ministry Setting:

High School Parish

Diocese Other: _____

Primary Ministry Area:

Youth Ministry Campus Ministry

Religious Ed. Teaching (subject): _____

Parent Other: _____

Ministerial Role:

Full-Time Paid Full-Time Volunteer

Part-Time Paid Part-Time Volunteer

Years of experience in campus/youth ministry:

0-2 3-5 6-10 11-15 16-20 21+

Do you hold a degree and/or certification in theology, youth ministry or a related field?

Yes No

Are you a:

Deacon Priest Brother Sister

Would you like this title to appear on your nametag?

Yes No

Additional Information

Have you attended Notre Dame Vision CYM before? Yes No

If yes, in which year(s) did you attend Notre Dame Vision CYM?

2018 2017 2016 2015 2014 2013

2012 2011 2010 2009 2008 2007

Did you attend Notre Dame Vision as a high school participant?

Yes No

How did you hear about Vision? _____

Discount Worksheet (for your records only)

For each student you send to Notre Dame Vision, you will receive a \$20 discount on your total Notre Dame Vision CYM fee. You may use the worksheet below to calculate your discount and enter the amount in the Payment Information section below. To create a group of 5 or more high school participants, use the "Group Organizer Information Form" to begin the registration for your group with Notre Dame Vision. Also, please read the Group Organizer Instructions for valuable information. Final discounts will be determined from the Group Organizer statements and based on actual registration numbers. The discount for each student may only be credited on one Notre Dame Vision CYM application.

Discount Calculator

Students:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Number of Students to enter into Payment Information below: (subject to final registration numbers) _____

Housing

The University of Notre Dame offers double occupancy campus housing to Notre Dame Vision CYM participants. Recognizing that some participants may desire to secure single occupancy campus housing, Vision CYM offers a limited number of single occupancy rooms for an additional \$100 fee. Participants may also decline campus housing. Please select your housing option below:

- I accept double occupancy at Notre Dame Vision CYM.
 - I would like to request this roommate: Last Name: _____ First Name: _____
 - I do not have a particular roommate request. I understand that Vision CYM will assign me a roommate.
- I request to "upgrade" my campus housing to a single occupancy room. (Please add \$100 to your total registration fee)
- I decline the offer of housing from Notre Dame Vision CYM. I will secure my own accommodations.

Payment Information

Deposit (to be included with this application to reserve a spot): \$100
Registration fee for applications postmarked **on or before April 6, 2019** \$350/person *not including deposit (\$450 total)*
Registration fee for applications postmarked **on or after April 7, 2019**:..... \$375/person *not including deposit (\$475 total)*

Payment Calculator

Deposit	\$100
Registration Fee	+ \$ _____
Single Occupancy Upgrade → \$100 (optional)	+ \$ _____
# of young people you are sending to Notre Dame Vision (from worksheet above) _____ x \$20	-- (\$ _____)
<hr/>	
Total Amount Due	= \$ _____

Final Payment is due no later than May 22, 2019

I am applying to attend one week of the Notre Dame Vision CYM Program in its entirety, from the opening session at 5pm Monday through the closing liturgy, which concludes on Friday at 12:30pm.

Signature of Applicant

Date

Please visit the Notre Dame Vision website at
<https://mcgrath.nd.edu/conferences/summer-institute/vision-cym-conference/>
for the full list of policies relating to applications, registration, cancellations, and program participation.

Please send completed applications and \$100 deposit to:

**Notre Dame Vision
334 Geddes Hall
Notre Dame, IN 46556**

The University of Notre Dame admits students of any race, color, nationality, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of gender, race, color, nationality, or ethnic origin in administration of the educational policies, scholarly and loan programs and athletic or other school-administered programs. The University of Notre Dame does not discriminate in admission, or access to, or treatment of employees in its programs on the basis of handicap.