

**St. Joseph "Rise Up" Conference March 23, 2019  
For Middle School Youth in Grades 6-8**



**Name** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Youth Cell Phone** \_\_\_\_\_

**Youth Email** \_\_\_\_\_

**Parent(s) Names** \_\_\_\_\_

**Parent Email(s)** \_\_\_\_\_

**Parent Cell Phone(s)** \_\_\_\_\_

**School** \_\_\_\_\_ **Current Grade** \_\_\_\_\_

*\*Conference ends at 3pm and youth will be required to be picked up at that time.\**

*If you would like to pre-purchase reduced rate tickets for  
Nickelodeon Universe or Sea Life Aquarium to use on your own, complete the 3<sup>rd</sup> page  
of this application and submit along with the added fees with this registration.*

**\*Registration is Double Sided\***



**Registration & \$70 due by January 2, 2019**

**Turn into St. Joseph Parish Office with ATTN: Kayla Rooney**

**\*Make Checks Payable to St. Joseph\***

OFFICE USE ONLY

Registration Received: \_\_\_\_\_ Payment Information: \$ \_\_\_\_\_ Check # \_\_\_\_\_ Initials \_\_\_\_\_



PARENTAL CONSENT FORM & INDEMNITY AGREEMENT
Rise Up Middle School Conference

Student/Participant Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Home Address \_\_\_\_\_

Family Email Address \_\_\_\_\_

Parish/School St. Joseph Church (13900 Biscayne Ave W, Rosemount MN 55068)

Date of Event/Field Trip March 23, 2019 Type of Field Trip "Rise Up" Conference

Destination Radisson Blu at the Mall of America (MOA), Bloomington, MN

Individual(s) in Charge Kayla Rooney

Estimated Time of Departure 9:00am Return 3pm

Mode of Transportation To & From Event Self (drop off/pick up from Radisson Blu at MOA)

Student Cost (if applicable) \$70

I, \_\_\_\_\_, grant permission for \_\_\_\_\_
Parent or Guardian Name Child Name

to participate in the above named activity and I warrant that my child is in good health. In consideration of my child's participation, I agree to indemnify the Church of St. Joseph and the Archdiocese of Saint Paul and Minneapolis from any claims or law suits brought against the Church of St. Joseph /Archdiocese of Saint Paul and Minneapolis by myself, my child or others, that arises out of any behavior by my child at the event/activity described above. I also agree to pay reasonable attorney's fees or expenses incurred by the parish/school and the Archdiocese in defense of such a claim/suit.

EMERGENCY MEDICAL TREATMENT: In the event of an emergency, I give permission to transport my child to a hospital for medical treatment. I wish to be advised prior to any further treatment by a doctor or hospital. In the event of any emergency, if you are unable to reach me at the above numbers, contact

Name Phone Number Relationship To Youth

MEDICAL INFORMATION:

Medication my child is taking at present \_\_\_\_\_

Allergies \_\_\_\_\_

Other Medical Conditions \_\_\_\_\_

Family Health Plan carrier number \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone Number \_\_\_\_\_

As Parent or Guardian, I agree to all of the above stated considerations and conditions.

Parent/Guardian Signature Date



## OPTIONAL "Rise Up" Conference Mall Attraction Add-Ons

After the Conference ends at 3pm, all youth will be required to be picked up. **At this time, parents/guardians are then responsible for their youth.** If you would like to purchase reduced rate tickets in advance for Nickelodeon Universe or Sea Life Aquarium please complete this form and return with your registration and the applicable added fees.

**Please check what item(s) you would like for your participant.** *We can only pre-purchase tickets in as much as # of youth attending the conference - so unfortunately we are unable to buy tickets for your whole family unless limited number of St. Joe's participants request tickets.*

**Youth Participant Name:**

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### Nickelodeon Universe Reduced Ticket Rates

\_\_\_\_\_ 3-Hour Wristband: \$12.00  
\_\_\_\_\_ 5-Hour Wristband: \$14.50  
\_\_\_\_\_ All Day Wristband: \$18.50

### Sea Life Aquarium Reduced Ticket Rates

\_\_\_\_\_ Adult Admission (13+): \$12.00  
\_\_\_\_\_ Child Admission (Under 12): \$7.00

**TOTAL EXTRA DUE \$ \_\_\_\_\_**

***\*Turn this form and additional added \$ in with your registration\****

*If you would like to potentially buy more tickets for your family for either of these attractions at the reduced rate, please initial here: \_\_\_\_\_*

*Upon reviewing of all applications at time of the due date, if limited # of participants are buying the add-ons, your family will be contacted about purchasing additional tickets (if initialed above).*

*Priority will be given to families who turned in registrations first.*