Southwestern Minnesota Synod Junior High Youth Gathering November 18-19, 19-20, 2016

August 2016

Dear Youth Ministers (and Pastors, Youth Directors, and Volunteers),

God's peace to you!

We are happy that you are looking over the registration materials for the Synod's annual Junior High Youth Gathering. This event is sponsored and planned by the Synod Lutheran Youth Organization (LYO) Board and will be held November 18-19 and 19-20, 2016. We will once again be partnering with the Willmar Conference Center & Best



Western Plus/Holiday Inn Express in order to bring you this awesome event! The gatherings begin by receiving registrants at 4:00 pm and end with closing worship at 11:00 am the next day.

Our theme this year is "You Are The Light." focusing on Matthew 5:14, "You are the light of the world."

Planned activities for this year include:

- Gathering speaker and musician, Rachel Kurtz (<u>www.rachelkurtz.org</u>)
- Nightlife featuring dancing, games, service projects, swimming and much more!!
- Fun during mass gatherings, worship, singing, spiritual growth, relationship building and hanging out!

As in the past, we will be completing gathering registration online. You will also have the freedom to choose your own hotel and room assignments. (Just as a reminder: the former Holiday Inn is now the Best Western Plus and the former Comfort Inn is now the Holiday inn Express.) Please see the enclosed registration information for details on how to book your hotel room.

Like last year, you and your church can order boxed "lunches," which will be waiting for you upon arrival. This way you won't have to leave the hotel to find a place to eat. (Look for a separate order sheet after you've registered!)

Thank you for promoting this event in your congregations and with your youth. We are looking forward to another outstanding gathering! If you have questions regarding the gathering please contact the Junior High Youth Gathering Manager Kaitlin Opdahl, at swmnelcajrhighgathering@gmail.com, or 320-293-2969. If you have questions concerning registration, please contact the Gathering Registrar, Shaun Luker at 507-276-8829 or at gatheringregistrar@yahoo.com.

See you in November!

Peace to you, The Southwestern Minnesota Synod Lutheran Youth Organization

Southwestern Minnesota Synod Junior High Youth Gathering November 18-19, 19-20, 2016

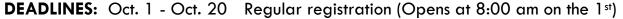
REGISTRATION INFORMATION

LOCATION: Willmar Conference Center – 2100 Hwy 12 E.

REGISTRATION COST: \$45 per person

Includes: programming, evening snack, breakfast, and t-shirt © <u>All registration fees are non-refundable for any reason, including inclement weather or sporting events.</u>

AGE: This gathering is for 6th-9th graders (whatever age group makes sense for Middle School or Jr. High youth in your community)



Oct. 21 - Nov. 1 Late registration - add \$5 non-refundable late fee per person Nov. 2 Registration Closed - no late registrations on or after this date

REGISTRATION FOR THE GATHERING: Please fill out the registration form <u>online</u> at http://www.swmnelca.org/youth_events and either pay online (with check or credit card) or make one check to the "SW MN Synod" and send it to the synod office.

Registrations will not be confirmed until payment is made.

MAILING ADDRESS:

SW MN Synod Junior High Gathering SW MN Synod Office PO BOX 499 Redwood Falls, MN 56283-0499 Tip: If you pay online with a check, <u>NO</u> credit card fees are charged to the synod.

REGISTRATION CONFIRMATION: Beginning October 4th, you will receive an email notice letting you know which night you are registered for the gathering (these are sent out in the order they came in). Once you have received confirmation of which night you are registered and receive your registration code, you may mail your hotel reservation form to the Best Western Plus (formerly the Holiday Inn). You will also be directed to the Synod website to download a gathering information packet that will include the schedule, group covenant, packing list, a pregathering checklist, and the medical release/information/media release form**.

(**The Medical Release/Information/Media Release Form has been re-worked from years past to better accommodate ALL participants--both youth and adults--please take a look at the final page of this packet, as it is something that each gathering participant will be required to fill out before your congregation's arrival. It will also be available for download beginning on October 4th.)



HOTEL RESERVATIONS

Reservations will be made by following three easy steps:

<u>Step 1:</u> After the gathering registrar receives your registration, you will receive an email confirmation, which will include a code that you will add to the hotel reservation form (see next page). This code indicates your group is registered for the gathering and allows the Best Western Plus to determine which night you will be attending. Do not send your hotel reservation form without your registration code.

<u>Step 2:</u> Once you have received your confirmation code, mail the room reservation form to the Best Western Plus in order to reserve rooms for your group. The Best Western Plus will be handling the housing arrangements for <u>ALL</u> hotels. They will book room requests in the order they receive them.

<u>Step 3:</u> The Best Western Plus will send you an email confirmation no later than November 9th, confirming your hotel accommodations.

**Note: A block of rooms at each hotel will be held until Nov. 4th, but keep in mind rooms will fill up as registrations come in. Special rates for gathering participants have been arranged at these hotels. Having the freedom to choose your hotel will enable you to make housing arrangements that will fit your budget, group dynamics, and hotel preference.

HOTEL INFORMATION

BEST WESTERN PLUS (formerly Holiday Inn):

All Rooms: \$108.80/night (including tax!)

Connected to the Willmar Conference Center where all gathering programming is held.

Amenities: Pool, Hot Tub.

HOLIDAY INN EXPRESS (formerly Comfort Inn):

Standard Room: \$108.80/night (including tax!)

King and Queen Suites: \$163.74/night (including tax!) King Suites have 1 king bed in one room, 1 sofa sleeper in the other room and space for at least 1 sing and 1 double air mattress. Queen Suites have 2 queen beds in one room, 1 sofa sleeper in the other room and space for at least 2 double air mattresses.

Located only feet away from the Willmar Conference Center.

Amenities: Pool, Hot Tub.

ROOMING ARRANGEMENTS: We require a ratio of 1 adult leader (21 years or older) to 5 youth. Each congregation may decide how to assign rooms. Depending on your room configuration and how many people you put in a room, you may want to bring sleeping bags and pillows. There is a limit of 5 people in each standard room. Reserving a suite will give you more freedom to have a greater number of people in one room. You may choose to have your youth stay in rooms with adults, or you may have your adults in rooms separate from youth.

A word about housing: We do our best to create a safe haven for all people. We do not allow adults to sleep in the same bed as youth. Please make a plan that includes bringing sleeping bags and possibly air mattresses. It is also a wise practice to use the rule of 3. Never have one adult and one youth in the sleeping room alone. When an adult is in the sleeping room, make sure there are two youth present, as well. These things are done for the protection of youth, adults and your congregation. If you have any questions, please contact Synod Youth Ministry Coordinator, Sarah Hausken 507-430-2273 or sarah.hausken@swmnelca.org

Southwestern Minnesota Synod Junior High Youth Gathering 2016 HOTEL RESERVATION REQUEST FORM

Dear SWMN Synod Attendee:

Thanks for your interest in staying with us for the gathering on November 18-19, 19-20, 2016! All reservations must be guaranteed with a credit card and cancellations must be received no later than November 9th, 2016. Cancellations received after November 9th, 2016 will result in one night's room fee and tax for each room cancelled being billed to your card. No refunds will be given after November 9th, for any reason, including poor weather. Reservations are taken on a **first-come**, **first-serve basis**. We will try to honor your hotel preference and room type (one bed or two) based on what is available **when we receive your reservation**.



Your hotel reservation confirmation number(s) will be emailed to you no later than November 16th, 2016.



Our rates for the 2016 gathering will be as follows:

- --Best Western Plus (formerly Holiday Inn)\$108.80* (including tax) per room/per night.
- --Holiday Inn Express & Suites (formerly Comfort Inn)
 - --Standard Room*.....\$108.80* (including tax) per room/per night.
 - --King or Queen Suite*...........\$163.74* (including tax) per room/per night.
 - *Please Note: Rate does not include hotel breakfast breakfast is provided at your event.

Please write your registration code in this box. Your code will be provided to you when you register for the

Reservation Information Needed RESERVATIONS WILL NOT BE TAKEN OVER THE PHONE — Please submit this form.

Church Name:	
Contact Name:	
Address:	City, State, Zip:
Phone #:	
Email Address (required for confirmation):	
Credit Card Number (if applicable):	Expiration Date:
Signature: (Required):	Fr Sa Circle Date Requested: November 18 19
# of Rooms:	Preference (Circle One - cannot guarantee): One Bed Two Beds
Hotel Preference (please mark 1st and 2nd choice): Best Western Plus (formerly Holiday Inn) Holiday In	nn Express & Suites (formerly Comfort Inn)
Comments:	
Mail to: Laurie Varpness, <u>Best Western</u>	CARD or CHECK PAYMENT REGISTRATIONS Plus, 2100 E Hwy 12, Willmar, MN 56201 (no faxes please) Must Be Provided to Make Reservations **
FOR OFFICE USE ONLY Confirmation Number(s):	
Location:	Room Tyne: One Red Two Reds

GATHERING COPY

Medical Release/Information/Media Release Form SW MN Synod Junior High Youth Gathering

Please reproduce this form: One form is needed for every

youth and adult participant.

Parent/Guardian Names (youth only):

Participant Name:

Age (youth only): _____

Parent/Guardian Phone Numbers (youth only): _____ Medical Conditions/Allergies: Emergency Contact (for youth participants, who can we call if parent/guardian is unavailable, for adult participants, who can we contact in case of an emergency): Emergency Contact Phone #____ Insurance Company name and policy #: Photo/Media Release Permission (It is OK for gathering planners to use photos and videos that include the above participant for future Youth Gathering communication.): ____ YES ____ NO Parent/Guardian Permission (youth only): I hereby grant my permission for my child to attend the SW MN Synod Junior High Youth Gathering, to be held at the Willmar Conference Center in Willmar, MN from Nov 18-19 & 19-20, 2016. I also grant my permission, in case of an emergency, for medical attention to be sought by the chaperones for my child's group and/or the persons in charge of the gathering. I understand that all efforts will be made to notify me immediately of any such happenings. Signed: __ (Signature of parent/guardian)

CONGREGATION COPY

Medical Release/Information/Media Release Form SW MN Synod Junior High Youth Gathering

Please reproduce this form: One form is needed for every

youth and adult participant.

Participant Name:	
Age (youth only):	
Parent/Guardian Names (youth only):	
Parent/Guardian Phone Numbers (youth only):	
Medical Conditions/Allergies:	
Emergency Contact (for youth participants, who can we call if parent/guardian is unavailable, for adult participants, who can we contact in case of an emergency):	
Emergency Contact Phone # Insurance Company name and policy #:	
Photo/Media Release Permission (It is OK for gathering planners to use photos and videos that include the above participant for future Youth Gathering communication.):	
YES NO	
Parent/Guardian Permission (youth only): I hereby grant my permission for my child to attend the SW MN Synod Junior High Youth Gathering, to be held at the Willmar Conference Center in Willmar, MN from Nov 18-19 & 19-20, 2016. I also grant my permission, in case of an emergency, for medical attention to be sought by the chaperones for my child's group and/or the persons in charge of the gathering. I understand that all efforts will be made to notify me immediately of any such happenings.	
Signed: Date: (Signature of parent/guardian)	

GATHERING COPY

Medical Release/Information/Media Release Form SW MN Synod Junior High Youth Gathering

Please reproduce this form: One form is needed for every

youth and adult participant.

Parent/Guardian Names (youth only):

Participant Name:

Age (youth only): _____

Parent/Guardian Phone Numbers (youth only): _____ Medical Conditions/Allergies: Emergency Contact (for youth participants, who can we call if parent/guardian is unavailable, for adult participants, who can we contact in case of an emergency): Emergency Contact Phone #____ Insurance Company name and policy #: Photo/Media Release Permission (It is OK for gathering planners to use photos and videos that include the above participant for future Youth Gathering communication.): ____ YES ____ NO Parent/Guardian Permission (youth only): I hereby grant my permission for my child to attend the SW MN Synod Junior High Youth Gathering, to be held at the Willmar Conference Center in Willmar, MN from Nov 18-19 & 19-20, 2016. I also grant my permission, in case of an emergency, for medical attention to be sought by the chaperones for my child's group and/or the persons in charge of the gathering. I understand that all efforts will be made to notify me immediately of any such happenings. Signed: __ (Signature of parent/guardian)

CONGREGATION COPY

Medical Release/Information/Media Release Form SW MN Synod Junior High Youth Gathering

Please reproduce this form: One form is needed for every

youth and adult participant.

Participant Name:	
Age (youth only):	
Parent/Guardian Names (youth only):	
Parent/Guardian Phone Numbers (youth only):	
Medical Conditions/Allergies:	
Emergency Contact (for youth participants, who can we call if parent/guardian is unavailable, for adult participants, who can we contact in case of an emergency):	
Emergency Contact Phone # Insurance Company name and policy #:	
Photo/Media Release Permission (It is OK for gathering planners to use photos and videos that include the above participant for future Youth Gathering communication.):	
YES NO	
Parent/Guardian Permission (youth only): I hereby grant my permission for my child to attend the SW MN Synod Junior High Youth Gathering, to be held at the Willmar Conference Center in Willmar, MN from Nov 18-19 & 19-20, 2016. I also grant my permission, in case of an emergency, for medical attention to be sought by the chaperones for my child's group and/or the persons in charge of the gathering. I understand that all efforts will be made to notify me immediately of any such happenings.	
Signed: Date: (Signature of parent/guardian)	