

SUMMER 2010

# MISSION

## Pine Ridge, SD

- The unemployment rate is around 80%
- 324 of the 3,504 homes on the reservation are heated by only wood
- Per capita income on the reservation is \$3,700 per year.
- 97% are below the poverty level.
- Shannon County is the second poorest county in the United States. It has the fourth-highest child poverty rate in the country.
- 31.2% over the age of 25 have no high school diploma.

July 17- 24,  
2010

Join today

## APPLICATION AND INFORMATION

Risen Savior is sponsoring our 14th annual Mission Trip. There is a strong tradition that was started in our parish community to involve young people in making a difference around North America. This tradition has taken us to Montana, South Dakota, Washington, Arizona, Oklahoma, Arkansas, Wyoming, and Canada. We have worked in small towns, big cities, and Indian Reservations to improve the morale of the communities.

Whether we're painting houses, performing minor home repair, cleaning up debris, volunteering in community gardens or other projects in the community, the projects students work on will serve as our way of blessing people in need.

**Youth are expected to be active in faith growing activities as they prepare for the mission trip. This includes attending Sanctuary regularly to grow as a community.**

### The Organization:

The trip is sponsored by Risen Savior and run through a Minneapolis based ministry, YouthWorks Inc. Information about YouthWorks can be found at [www.youthworks.com](http://www.youthworks.com).

### Transportation:

We will make the trip by rental vans. We will spend time traveling the day before and after our service at the Reservation.

### Housing:

We will be staying at a school or church.

### Evening Activities:

Evening activities are designed to give us insight into the lives of local residents. Activities may include:

Attend a Buffalo Feed, Visit the Site of the Wounded Knee Massacre, Community Cookout, Community Cultural Activity

### Meetings:

There are five mandatory meetings as well as a mandatory group outing and the sendoff Mass in July. See below for the dates. Failure to attend meetings may result in a forfeiture of your spot and deposit.

### FAQs:

- Can I reserve a spot without paying the deposit?  
No, space is reserved on the full application is turned in and the deposit paid. If there is a financial burden, contact Travis and arrangements can be made.
- Does work count as an excused absence for meetings?  
NO! Please plan your schedule around meetings and fundraisers.

| COST  | FUNDRAISERS  | WHO  | LEADERS   | MEETINGS   |
|---|--|--|---|--|
| \$525 to cover the site cost and travel expenses. There is a \$150 non-refundable deposit required with the application. Participants pay for meals during travel to and from the site. | Each member of the mission team is required to participate in the fundraisers. This will help reduce the cost of the trip to each member. There are 3 fundraisers. | Youth in the 10-12th grades during the 2009-10 school year. Friends in the 10-12th grades are welcome. | There is a team of 5 adults helping to lead the mission trip. | There are required monthly meetings. There is a required parent only meeting on 1/11 at 6 pm. Youth meetings are from 7-8:30 pm on 2/1, 3/15, 4/12, 5/10, 6/14. There's also a group outing & sendoff Mass July. |

## **Mission Trip Application Checklist**

- Risen Savior Mission Release Signed and completed fully
- Questionnaire completed
- Contract Read and Signed by youth and parent
- YouthWorks Covenant Signed by youth and parent
- YouthWorks release and medical info completely filled out and signed
- Copy of insurance card turned in
- Deposit of \$150 payable to Risen Savior paid
- Requested meeting nights off of work and put on calendar

# RISEN SAVIOR MISSION RELEASE AND CONTRACT

THIS MUST BE COMPLETED FULLY PRIOR TO TURNING IN YOUR APPLICATION.

Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
Zip \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Sex: M F Grade in 2009-2010 school year \_\_\_\_\_  
Parent/Guardian Name \_\_\_\_\_  
Email Address: \_\_\_\_\_  
(print legibly)

**In Case of Emergency:** I understand that every effort will be made to contact me. If I cannot be reached I hereby give Church of the Risen Savior the permission to act in my behalf in seeking emergency treatment for my child in the event that such treatment is deemed necessary by Church of the Risen Savior. I give my permission to those administering emergency treatment to do so, using those measures deemed necessary. I absolve Church of the Risen Savior from liability in acting on my behalf in this regard so long as Church of the Risen Savior is not grossly negligent. I hereby give permission to Church of the Risen Savior to administer medications named to my child as well as general OTC cold, flu or pain medication unless listed as an allergy or otherwise stated. I agree to allow Church of the Risen Savior to use the same release, liability, and policies set forth in the "2010 YouthWorks Participant Release Form" for all 2010 Mission Trip related activities. This includes but is not limited to meetings, fundraisers, travel, and other activities directly related to the Mission Trip. I authorize Church of the Risen Savior to use photos or videos taken of my child at the event for Church of the Risen Savior promotional purposes only.

Signature of Parent or Guardian \_\_\_\_\_  
Daytime Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

1. Why do you want to attend this Mission Trip, and what do you hope to learn from it?  
\_\_\_\_\_  
\_\_\_\_\_

2. Read the mandatory meeting policy in the contract. What are your feelings of being expected and responsible for attending all mission trip meetings and fundraisers?  
\_\_\_\_\_  
\_\_\_\_\_

3. Are there any potential conflicts with either the meeting dates, fundraisers, or the trip itself? Please take time to consider sports, tournaments, the arts, or any other personal conflicts.  
\_\_\_\_\_  
\_\_\_\_\_

4. What are your talents and gifts that you bring to this mission trip?  
\_\_\_\_\_  
\_\_\_\_\_

5. What are your expectations of people you will come in contact with throughout the trip (leaders, mission team members, tribal members?)  
\_\_\_\_\_  
\_\_\_\_\_

## Questionnaire

### **Mission Contract**

You **MUST** agree to, sign, and abide by this contract to participate in the 2010 Mission Trip. Parent/Guardian and Youth must sign.

I agree to attend and participate in all scheduled meetings and fundraisers. I agree to contact Travis Wyman if I am unable to attend any meeting or fundraiser. I agree that if I miss any combination of two meetings or fundraisers due to unexcused reasons, I may be asked to forfeit my spot on the mission trip without a refund of the deposit or accumulated fundraising. I also understand that I will be responsible for the

balance of the cost, \$278, for my spot on the trip.

\_\_\_\_\_  
Youth Signature:

\_\_\_\_\_  
Date

### **Parent/Guardian Agreement**

I have read, agree, understand, and reviewed the terms of the contract with my child and agree to see that they are followed by my child.

I agree and understand that if my child withdraws or forfeits their spot due to not meeting the contract expectations listed there will be no refund of the \$150 deposit or any accumulated fundraiser earnings. I also understand that I will be responsible for the total cost of the work site, \$278.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

In order to have a safe and life-changing mission experience, clear expectations are needed between all who are involved. We desire to serve communities without bringing them any harm, as a result, we ask all participants of YouthWorks trips, both youth and adult leaders, to agree to the following expectations in accordance with the purpose of a YouthWorks mission trip.

The goal of the covenant is to ensure the knowledge of YouthWorks policies, solidify your commitment to your group and demonstrate your respect of the community you will be serving.

- Because I want to truly help others as Jesus did, I agree to bring a servant, joyful attitude. I understand that I am on the trip to serve God, help a community, build new relationships and learn new things. I agree to come prepared to do so!
- Because I am aware that my actions have consequences beyond myself, I agree to obey all local laws and ordinances pertaining to use of drugs and alcohol by minors. I will not bring or use illegal substances on any YouthWorks controlled ministry sites, on the property of our ministry partners or in vehicles of any YouthWorks participants.
- Because I want nothing to distract me in this short week of serving others and because valuables are more susceptible to theft at a mission site, I understand that I am not to bring to the site a walkman, discman, portable radio or boom box, electronic games, lap top, mp3 player, ipod, portable DVD player or any other device that could potentially isolate me from those around me. I understand that cell phones are to be used for emergency purposes only.
- Because I am coming and returning with a group, I agree that this mission week is a group experience. I will do my best to build community, create relationships, be welcoming and include others. I agree to treat everyone - leaders, staff, other groups and community members - with the utmost respect.
- Because I know that how I treat people's things makes a statement, I agree that I will respect the property of all participants, the community members and the housing site in which we stay. I will conduct myself as a representative of Jesus Christ at all times, remembering the purpose of the trip and my responsibility as a witness to the community.
- Because I know that my parents and leaders care about my well-being, I agree to stay within the designated YouthWorks boundaries, stay in groups of three or more, respect gender specific areas, follow rules at the ministry sites and communicate with my group. I agree to keep my personal safety foremost in all of my decisions.
- Because I do not want to cause harm to anyone, including myself, I agree to follow the clothing policy. I understand that the way I dress can affect my ministry and I will respect my group, the community and myself by dressing modestly. I also agree to respect gender rules and not enter sleeping areas and restrooms of the opposite gender.

I agree to follow all of the above because I desire to represent Jesus in a positive manner at all times.

\_\_\_\_\_  
**Participant/Adult Leader Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

Bring to Site

**2010 YouthWorks Participant Release Form**

(To be filled out by both Youth and Adults)

**Name of Participant (please print)** \_\_\_\_\_

**Participating with (Church or Organization Name):** Church of the Risen Savior

**Name of Site:** Pine Ridge - Indian Reservation      **Week Attending:** July 18-23, 2010

**Liability Release Agreement**

I/we understand that there are inherent risks involved in any mission trip, and I/we hereby release YouthWorks!, Inc., its staff and volunteer workers from any and all liability due to any injury, loss or damage to person or property that may occur during the course of my/our involvement with the YouthWorks organization.

\*During the week your child is with YouthWorks, they may be photographed or video taped for promotional materials.

**Transport Home Agreement**

I/we, the undersigned, are the parents having legal custody or the legal guardians of the above named participant, a minor, have given our consent for him/her to attend a mission trip operated by YouthWorks, or are of legal consenting age myself. I/we understand that a member of the YouthWorks staff or the lead adult of our group may need to send a participant home as a result of illness or discipline problem. I/we understand if the participant named above is dismissed from the mission site, I/he/she will be transported home at my/our expense. YouthWorks or the lead adult of our group will attempt to contact the parent or guardian to arrange such transportation.

**Medical Release Agreement**

I/we the undersigned, are the parents having legal custody, or the legal guardians of the above named participant, a minor, have given our consent for him/her to attend a mission trip operated by YouthWorks!, Inc., or are of legal consenting age myself. In the event that I/he/she is injured while attending the trip and requires the attention of a doctor, I/we consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is called for, which a physician and/or hospital personnel refuses to administer without my/our consent, I/we hereby authorize Travis Wyman, the lead adult of our group, or a member of the YouthWorks staff to give such consent for us if I/we cannot be reached by telephone at one of the numbers listed below, or because of an emergency, there is not time or opportunity to make a telephone call. In the event it becomes necessary for that person to give consent for us, I/we agree to hold such person free and harmless of any claims, demands or suits for damages arising from the giving of such consent so long as the treatment is administered by or under the supervision of a licensed physician. I/we also acknowledge that I/we will be ultimately responsible for the cost of any medical care should the cost of that care not be reimbursed by the health insurance carrier. Further, I/we affirm that the health insurance information provided below is accurate at this date and will, to the best of my/our knowledge, still be in force for the participant named above at the time of the mission trip.

**Full Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**Address** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Date of Last Tetanus Shot** \_\_\_\_\_ **Known Allergies** \_\_\_\_\_

**Current Medications or Health Conditions** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**\*Please attach a copy of your insurance card to this form.**

**Emergency Contact Information**

1) \_\_\_\_\_  
Relationship to Participant \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

2) \_\_\_\_\_  
Relationship to Participant \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

**Insurance Information**

Name of health insurance company \_\_\_\_\_  
Health insurance policy number \_\_\_\_\_  
Phone/address of health insurance company \_\_\_\_\_  
Name of policy holder \_\_\_\_\_  
Policy holder's phone number \_\_\_\_\_

Participation on a YouthWorks trip is contingent upon compliance with all the policies stated on the previous page.

- Participant Liability
- Transport Home
- Medical Release

Participant/Adult Leader (Print) \_\_\_\_\_

(Signature) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (1) (Print) \_\_\_\_\_

(Signature) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (2) (Print) \_\_\_\_\_

(Signature) \_\_\_\_\_ Date \_\_\_\_\_

\*If the participant is older than 18 years, no Parent/Guardian signatures are necessary.