

**HAGALIL U.S.Y.**  
**SPRING CONVENTION APPLICATION 2010**  
 AT THE CROWNE PLAZA, SOMERSET APRIL 23-25, 2010

PLEASE ATTACH A  
 CURRENT PHOTO  
 HERE. YOUR  
 APPLICATION WILL  
 NOT BE PROCESSED  
 WITHOUT IT.

**PRICE INCLUDES: HOTEL ACCOMMODATIONS \* TRANSPORTATION \* ALL MEALS \* USE OF HOTEL FACILITIES \* EDUCATIONAL MATERIALS \* A WEEKEND FULL OF PROGRAMS \* LOTS OF FUN!!**

**INSTRUCTIONS:**

1. To reserve a space, it is essential that this application form along with a check for \$ 258.00 made payable to N.J. Region- U.S.Y. and be mailed to: U.S.Y., 1090 King Georges Post Rd. Suite 1003, Edison, NJ 08837. The deadline for applications is **MARCH 19, 2010**, so please be sure that they get it in advance of this deadline.
2. No application will be accepted without all signatures below, a photograph and payment.
3. The convention price includes round trip bus transportation from designated locations as determined by the Regional Director. There will be no credit or refund for unused busing. Please note that the buses leave on Friday before noon CONVENTION BEGINS AT 1:00 P.M. IF YOU CHOOSE NOT TO TAKE THE BUS, YOU SHOULD ARRIVE AT THE HOTEL BY 1:00 P.M. AS THE PROGRAMMING BEGINS AT 1:00 P.M.
4. **THERE ARE NO REFUNDS.**

NAME: \_\_\_\_\_ SEX: \_\_\_M \_\_\_F GRADE \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
CITY ZIP

PARENTS' HOME PHONE: \_\_\_\_\_ CHILD'S PHONE NUMBER: \_\_\_\_\_

PARENT'S CELL PHONE: \_\_\_\_\_ PARENT'S EMAIL ADDRESS: \_\_\_\_\_

CHAPTER: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

VEGETARIAN \_\_\_Y \_\_\_N ARE YOU A VEGAN? Y \_\_\_N ARE YOU GLUTON FREE? \_\_\_Y \_\_\_N

ARE YOU LACTOSE INTOLERANT? \_\_\_Y \_\_\_N DO YOU HAVE ALLERGIES? \_\_\_Y \_\_\_N

IF YES, WHAT FOOD, DRUG, INSECT OR SUBSTANCE: \_\_\_\_\_

RELIGIOUS INFORMATION \_\_\_ COHEN \_\_\_ LEVI \_\_\_ ISRAEL

I AM INTERESTED IN LEADING RELIGIOUS SERVICES \_\_\_ YES \_\_\_ NO IF YES, WHICH ONE: \_\_\_ PSEUKEI \_\_\_ SHACHARIT  
 \_\_\_ TORAH SERVICE \_\_\_ MUSAPH \_\_\_ MINCHA \_\_\_ MAARIV \_\_\_ BIRKAT HA MAZON I CAN READ: \_\_\_\_\_ TORAH  
 HAFTORAH

**ROOMING REQUESTS: LIST NAME AND CHAPTER OF TWO PEOPLE. ALL REQUESTS MUST BE RECIPROCAL. WE WILL DO OUR BEST TO HONOR YOUR REQUESTS BUT CANNOT GUARANTEE THAT YOU WILL ROOM WITH PEOPLE YOU REQUESTED. (Please note, due to the hotel configuration, rooms will have 3 or 4 delegates per room. There are two double beds per room.)**

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

By signing below I attest to the fact that this USYer fulfills the following standards:

- A. Attends at least 50% of Chapter activities
- B. Attends at least 2 religious services per month, at least one Shabbat.  
 ( ie... Shabbat services, youth group services on Shabbat, services at USY meetings, or at Hebrew high or day school/yeshiva. Attendance at previous regional events would count.)
- C. Is a student of supervised Judaic Studies (Hebrew high school, day school/yeshiva, Perek Yomi, USY home study, private tutoring, kitot at conventions count )

\_\_\_\_\_  
 Signature of Advisor/Youth Director

\_\_\_\_\_  
 Signature of Rabbi

**ANY QUESTIONS: CALL MICHELLE RICH AT (732) 738-7960 (DURING REGULAR BUSINESS HOURS)**

**A CONFIRMATION EMAIL WILL BE SENT TO THE APPLICANT AND THE PARENTS THE WEEK OF APRIL 12<sup>TH</sup>. NO MAILED CONFIRMATION WILL BE SENT.**

**PLEASE READ AND SIGN THIS CODE OF CONDUCT**

In connection with any Regional program (including dances), including travel to and from such program:

- 1. There is to be no smoking.
2. There is to be no possession or use of any narcotics, marijuana, other illegal drugs or prescription drugs not prescribed for the user.
3. There will be no possession or consumption of any alcoholic beverages.
4. There will be no shoplifting or any other theft of any kind.
5. If a USYer is caught in possession of/or using alcohol or illegal drugs, he/she will immediately be sent home at his/her parents' expense. Furthermore, USY International policy states: "Anyone violating any such rules at a regional event for the infraction of these rules is barred from International events for one year following the infraction. These events include (but are not limited to) the International USY Convention and USY summer programs." The Region reserves the right to impose additional sanctions in connection with this or any other improper behavior as it sees fit.
6. All Convention delegates are expected to be in sessions (services, meals, study groups, etc.) No attendees may leave the synagogue except at those times specified by the convention schedule. NO USYer may leave the premises without prior approval of the Regional Director and a parent.
7. All males are expected to bring a tallit and tefillin. All males are required to wear a kippah during all services, meals and study groups. Tallit/tefillin must be worn for morning services where appropriate.
8. Each participant is expected to maintain proper decorum and attitude during the entire program. Disruptive behavior (including, among other things, inappropriate sexual behavior) will not be tolerated. Your parents will be responsible to pay for any damage you may cause.
9. Proper dress is expected of everyone. For Shabbat, males must wear a jacket and tie or sweater, no jeans or sneakers. Females are to wear dresses or skirts, no shorts, culottes or dress pants. All USYers shall wear clothing appropriate to the event/location.
10. All housing/rooming/bunking assignments are final. Changes can only be made by the Regional Director or her designee. All USYers must be in their assigned house at curfew and remain there. Males are not permitted in sleeping rooms of females and females are not allowed in the sleeping rooms of males.
11. Each participant is expected to conduct him/herself appropriately as a Conservative Jew (including through the observance of Shabbat and Kashrut), in accordance with applicable standards of the Law and Standards Committee of the Rabbinical Assembly and/or the local Rabbinical Authority.
12. No USYer shall violate any civil or criminal law, including but not limited to, those related to tampering of or destruction of property, and destruction of one's own or another person's physical and/or mental integrity. Inappropriate or unwelcome physical contact or language, indecent attire or public nudity, shall not be permitted.
13. The Region reserves the right to search the room and belongings of any attendee if it has reasonable grounds to believe that such a search is necessary to secure the health, safety and/or welfare of the program and or its participants. USY or Kadima Director, in consultation with the Regional Youth Commission, reserves the right to enforce other rules relating to the integrity of the Regional Youth Program and/or the health, safety or welfare of its participants.

I have read these rules and understand them fully. I certify that I will adhere to this Code and will conduct myself in a manner reflecting credit upon myself, my chapter, congregation and community. Any violation of this code of conduct may result in the participant being sent home at his/her parents' expense. The Regional Director has the sole discretion to send a participant home.

\_\_\_\_\_  
SIGNATURE OF USYer

I \_\_\_\_\_, the parent/guardian of \_\_\_\_\_, a minor, who will be participating in USY Regional programs, do hereby certify that I have read the Code of Conduct set forth above. I do hereby agree that if my child who has signed the above Rules of Conduct fails to adhere to the Code, then in such event those persons in charge of the program may send my child home at my expense. I understand that the Regional Youth Director has the sole discretion to send my child home.

I have been made aware of the fact that the events in which my child is participating may be photographed by either amateur or professional photographers, that the photographs taken may be used both for purposes of reporting on the event or for such other use as the Hagalil USY or Kadima organization may determine. I have no objection to the pictures taken being used at any time for promotional use. It is my understanding that by signing this document I consent to the use of the pictures just referred to.

\_\_\_\_\_  
SIGNATURE OF PARENT

\_\_\_\_\_  
DATE

**MEDICAL INSURANCE CO. \_\_\_\_\_ POLICY NUMBER \_\_\_\_\_**  
**ALL USYers MEMBERS MUST BE COVERED BY HEALTH CARE INSURANCE IN ORDER TO PARTICIPATE IN REGIONAL PROGRAMS.**

EMERGENCY CONTACT PERSON \_\_\_\_\_ EMERGENCY PHONE # \_\_\_\_\_  
(not a parent)

Current Medication(s) or Medical Treatment \_\_\_\_\_  
Will your child have medication with them for the weekend? \_\_\_Y\_\_\_N  
Has your child been diagnosed with ADHD/ADD? \_\_\_Y\_\_\_N If yes, is your child currently on medication? \_\_\_\_\_  
Recent illness, hospitalization, injury or surgery \_\_\_\_\_  
Disability, chronic illness or condition \_\_\_\_\_  
Activity restriction or modification \_\_\_\_\_

**STATEMENT AND EMERGENCY AUTHORIZATION**

I (the parent or legal guardian) of the applicant state that he/she is in good/normal health, has no physical or mental handicaps that would interfere with full participation in the program and has my permission to engage in all available activities except as noted under Restrictions or Modifications above.

In case of a medical emergency, accident or health problem where immediate treatment is deemed necessary, every effort will be made to expeditiously contact the parent(s) or guardian(s) of the participant, or the emergency contact person listed above. In the event I cannot be reached, I hereby give permission to the physician selected by the Regional USY/Kadima Director, or his/her designee, to hospitalize, secure proper and ongoing treatment and to order injection, anesthesia, or surgery for my child as named above. I am aware that this form may be photocopied for use by medical caregivers.

**SIGNATURE OF PARENT OR LEGAL GUARDIAN** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_