

# YOUTH OF ST GEORGE, PISCATAWAY MEMBERSHIP APPLICATION

**\*\*\*\*\*REGISTRATION DEADLINE IS SEPTEMBER 24, 2018\*\*\*\*\***

**MEMBERSHIP DUES ARE \$30 PER CHILD, PER YEAR AND MUST  
ACCOMPANY THIS APPLICATION,  
MAKE CHECKS PAYABLE TO: St George YOUTH**

**(NO registration forms will be accepted without payment or payment without registration forms)**

### PLEASE PRINT AND FILL OUT ALL INFORMATION

NAME \_\_\_\_\_  
LAST FIRST

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # (HOME) \_\_\_\_\_ (CELL) \_\_\_\_\_

GOYAN'S EMAIL ADDRESS: \_\_\_\_\_

BIRTH DATE \_\_\_ / \_\_\_ / \_\_\_ PRESENT AGE \_\_\_\_\_ PRESENT GRADE \_\_\_\_\_

**SCHOOL ATTENDING (NAME/CITY) \_\_\_\_\_**

FATHER/GUARDIAN'S NAME \_\_\_\_\_ WORK# (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

FATHER'S EMAIL: \_\_\_\_\_ CELL PHONE (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

MOTHER/GUARDIAN'S NAME \_\_\_\_\_ WORK#(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

MOTHER'S EMAIL: \_\_\_\_\_ CELL PHONE (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

I, \_\_\_\_\_ consent and allow the ST. GEORGE GOYA program to use, publish and copyright my image, picture, portrait or likeness and voice recorded in any format at Greek Orthodox Youth Association (GOYA) functions. I understand the use of my image or voice will be used in the context in which it was taken without alterations, modifications, derivations. I understand that my image MAY be used for a GOYA video, and/or for use in publications such as The Voice of St George, The Orthodox Observer, the Hellenic Times, the St George or GOYA website, for advertising and similar such promotions and renditions throughout the world. I have received no consideration for this release.

YOUTH SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

- 1. HAVE YOU SUBMITTED A COPY OF YOUR BIRTH CERTIFICATE? \_\_\_\_\_ YES \_\_\_\_\_ NO
- 2. HAVE YOU SUBMITTED A COMPLETED HEALTH FORM? \_\_\_\_\_ YES \_\_\_\_\_ NO
- 3. HAVE YOU SUBMITTED ALL 6 PAGES OF REGISTRATION? \_\_\_\_\_ YES \_\_\_\_\_ NO

## **G.O.Y.A. RULES AND REGULATIONS**

The purpose of G.O.Y.A. is to direct me to become a worthy servant of my Lord Jesus Christ within the Orthodox Christian Faith. My fellowship with my peers in religious, educational, philanthropic, social, athletic and cultural activities should always reflect my Christian Faith.

I hereby agree to abide by and observe all the Rules and Regulations that have been set down by the State Youth Committee and by my Parish Youth Group (St George, Piscataway) and in particular:

- 1 - To obey the "St George GOYA Rules and Regulations".
- 2 - To attend Church Services, Sunday School, and Retreats faithfully.
- 3 - To obey and respect the Youth Advisors, Coaches, Adult Leaders and Chaperones while attending GOYAN functions.
- 4 - Do not drive an automobile to any, Local, District or State Youth functions without the specific permission of the Priest, Youth Advisor and Parent/Guardian. No passengers will be permitted without the permission of the Priest, Youth Advisor and Parent / Guardian.
- 5 - Do not leave the grounds at any GOYA functions without receiving the Advisor's permission.
- 6 - To attend Meetings, Practices, and GOYA events, faithfully.
- 7 - Do not use the following: Abusive language, cheating, stealing, lying, alcohol, cigarettes, and drugs or to become involved in physical violence and damages. To respect each GOYA member.
- 8 - To attend Church Services on Sundays of District Basketball / Volleyball Games.
- 9 - I will adhere to ALL deadlines, for each GOYA Event.

If I miss any deadlines, I understand that no special considerations or privileges can be made.

- 10 - PARENTS MUST BE ON TIME TO PICK UP GOYANS AFTER PRACTICES, GOYA EVENTS AND WHEN BUS RETURNS TO CHURCH AFTER AN EVENT.

*If any of the above rules and regulations are broken, the privilege of attending and participating in youth functions will be SUSPENDED OR DENIED. The Parish Priest and Youth Advisors will review all infractions with input from the Executive Youth Board.*

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

GOYAN Signature \_\_\_\_\_ Date \_\_\_\_\_

**GOYA HEALTH PERMISSION FORM**

GOYAN'S NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ EMPLOYMENT \_\_\_\_\_ cell # \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ EMPLOYMENT \_\_\_\_\_ cell # \_\_\_\_\_

FAMILY DOCTOR'S NAME \_\_\_\_\_ TEL # \_\_\_\_\_

HOSPITAL OF CHOICE \_\_\_\_\_

DENTIST'S NAME \_\_\_\_\_ TEL # \_\_\_\_\_

MEDICAL PROBLEMS \_\_\_\_\_

MEDICATIONS ON A REGULAR BASIS \_\_\_\_\_

KNOWN ALLERGIES \_\_\_\_\_ REACTION \_\_\_\_\_ TREATMENT \_\_\_\_\_

Names and telephone numbers of two persons to contact if your child is ill or injured.  
In the event that the parent or guardian cannot be contacted, these persons might have to make a medical decision.

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

**EMERGENCY MEDICAL TREATMENT**

To the Advisors and Reverend:  
In the event that I am unable to be reached and my child needs EMERGENCY MEDICAL TREATMENT during any time he/she is a member of the G.O.Y.A., you have my permission, and I hereby designate you my agent, to act in my son's/daughter's best interest in obtaining necessary transportation and medical care until I can be contacted. I hereby release you from any claim arising out of the doctor's actions, and I assume and agree to pay for any professional medical services incurred.

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

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

Permission for emergency medical treatment will be effective throughout the member's enrollment.  
If there is any change of information, please telephone the Reverend or Advisors.

YOUR INSURANCE COMPANY \_\_\_\_\_

GROUP IDENTIFICATION #: \_\_\_\_\_

MEMBER # \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

**St. George Piscataway G.O.Y.A**

**Zero Tolerance Policy for Drugs and Alcohol**

The St. George Piscataway GOYA hereby adopts a “Zero Tolerance” policy for drug and alcohol use for the members of the organization during any meeting, sporting event, the Tenafly White Out Dance, Sights and Sounds, Greek Festival, Church dances, Taverna Night or any other event scheduled or sponsored by the St. George GOYA.

This policy will apply to any member who is observed using non-prescription drugs or alcohol or any members displaying the after effects of alcohol or drug use. This will include any member who is considered “under the influence” of alcohol or drugs or impaired in any way by the consumption of drugs or alcohol as determined by any two GOYA Advisors or one Advisor and a Clergy Member. This policy will also apply to any individual or individuals who are in possession of any alcohol or drugs or facilitated their distribution in any way to GOYA members or nonmembers at any of the above described GOYA sponsored events even if said individuals did not consume any of what was distributed.

In the event a member is being treated by a physician and is in need of prescription medications written for their individual consumption which may impair them in any way then it will be the responsibility of the member’s parent to notify the Goya Advisor, in advance of any event, that such medications are necessary and what the potential implications may be. Failure to notify a Goya Advisor in advance of any event will subject the member to the same discipline listed below without exception.

In the event a member is considered under the influence of drugs or alcohol or is observed consuming or at any point immediately before or during a sponsored event is in possession of drugs or alcohol then the following mandatory disciplinary procedures will apply:

- The member will be immediately removed from the event; parents will be notified and requested to the location to take their child home.
- The member will be suspended from all GOYA activities for the remainder of the fiscal year.
- In the event the severity of the drug and or alcohol use or distribution is so pervasive that Priest and the GOYA Advisory Board, in the majority, determines permanent expulsion from the organization is necessary, then it may act to do so at any regular or Special meeting called by the Priest.

The GOYA Advisory Board embraces the assistance of every parent and GOYA member to insure that all sponsored events are free from drugs and alcohol. It is the Priest’s and the Board’s intention to keep all the kids safe and in a healthy spiritual environment.

The below pledge which must be signed by the Goya member and their parent. This will serve as an affirmation of the above principles and policy and insure that all members and parents are in agreement with and will work toward a true policy of Zero Tolerance.

We the undersigned do hereby pledge to abide by the above policy and all rules of the St. George GOYA and we understand that any infractions or violations of the above policy will result in the mandatory discipline outlined above without exception.

GOYA Member Name (Print)	GOYA Member (Signature)	Date
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St. George Greek Orthodox Church  
V. Rev. Archimandrite Nektarios Cottros, Pastor

**PARENTAL RELEASE FORM 2018**

Name of GOYAn: \_\_\_\_\_  
First Name, Last Name, Middle Initial

I/We, \_\_\_\_\_, as parent/legal guardian(s) of \_\_\_\_\_, give permission for my/our child to participate in any/all activities of the St. George GOYA for so long as my/our child is a registered member of the St. George Greek Orthodox Church Piscataway GOYA and all activities related to the Greek Orthodox Metropolis of New Jersey GOYA unless otherwise indicated on this form, or on the child's medical form. These activities include but are not limited to: basketball, volleyball, track and field events, swimming, dancing and field trips.

I/We understand that no responsibility is incurred by the St. George GOYA, the Greek Orthodox Archdiocese of America, the Greek Orthodox Metropolis of New Jersey, St. George Greek Orthodox Church, Piscataway, their leaders, employees, and volunteer staff, for the loss of documents, or damage to luggage or any other personal belongings.

I/We understand that photos and/or video will be taken throughout the event of the activities and the participants. I/We also understand that photos and any videos will be taken for the sole purpose of future promotion of the program. Therefore, we consent to the use of any video images, photographs, audio recordings, or any other visual or audio reproduction that may be taken of my/our child during the activities of the St. George GOYA to be used, distributed, or shown as St. George Greek Orthodox Church, St. George GOYA and/or the Greek Orthodox Metropolis of New Jersey see fit.

I/We understand that all reasonable safety precautions will be taken at all times by the St. George Greek Orthodox Church, St. George GOYA and the Metropolis of New Jersey and their agents during all activities of the St. George GOYA. I/We understand the possibility of unforeseen hazards and know the inherent possibility of risk in all sporting activities, dances, water activities, etc. I/We agree not to hold St. George Greek Orthodox Church, St. George GOYA, the Greek Orthodox Archdiocese of America, and the Greek Orthodox Metropolis of New Jersey, their leaders, employees and volunteer staff liable for damages, losses, diseases, or injuries incurred by the subject of this form.

Please note that in providing recreational or sporting activities, the Greek Orthodox Metropolis of New Jersey, St. George Greek Orthodox Church, Piscataway and the St. George GOYA does not hold itself responsible in any way for any injury that might arise from participation in any such events.

Participation is strictly voluntary and carries with it the commonly held understanding that some degree of risk is associated with any and all activities including but not limited to sporting activities, dances and the like.

\_\_\_\_\_  
Parent's or Guardian's Signature Date

1101 River Road, Piscataway, NJ 08854 Tel: (732) 463-1642 Fax: (732) 699-9309  
Web: [www.stgeorgepiscataway.org](http://www.stgeorgepiscataway.org) E-mail: [sggoc@optonline.net](mailto:sggoc@optonline.net)



**GOYA CODE OF CONDUCT**

Name of GOYAn \_\_\_\_\_  
 First Name Last Name Date

Name of Parent(s) or Gaurdian(s) \_\_\_\_\_

By reading and signing this covenant, I (the GOYAn) and my parent(s)/legal guardian(s) confirm that we understand this GOYA

Code of conduct. I agree to comply with all of the rules and meet all of the expectations stated below while participating in a GOYA event:

- I will come with an open heart and mind, ready to have fun, learn, and grow in my Faith.
- I will treat the Clergy, the GOYA advisors, any chaperones, event staff, and all the other GOYAns with respect while at a GOYA Event.
- I will fully participate in all camp activities.
- I will follow all rules, regulations, and instructions that will be given by the GOYA Event hosts and any GOYA Advisors.
- I will not bring tobacco, alcohol, drugs (other than those prescribed by a doctor), weapons, fireworks, or pornographic material to any GOYA events, and I will not use them while at a GOYA event. I understand that my parents will be notified, and that I will be sent home at my parent’s/guardian’s expense if I fail to meet this expectation.
- I will wear appropriate clothing while at a GOYA event. None of my clothing will exhibit vulgar, suggestive, gang related, or irreligious language or images. None of my clothing will advertise or promote the use of alcohol, tobacco, drugs, weapons, or violence. I will wear clothing that covers my stomach and underwear while at a GOYA Event. Short skirts/dresses, overly tight or revealing clothing will not be allowed. I understand that the dress code will be enforced at the discretion of the GOYA Event hosts and the GOYA advisors. I understand that if my clothing is found to be inappropriate I will be given an oversized t-shirt to wear.
- I will use appropriate language and will not curse, use obscene hand gestures, or participate in vulgar conversations. I will not harass any advisors or fellow GOYAns in any way.
- I will dance appropriately at any GOYA Event. I understand that the dance code will be enforced at the discretion of the event hosts, GOYA Advisors and chaperones responsible.
- I will treat the property of others with respect. I understand that I am responsible to pay for any property I willfully or recklessly damage, destroy, or steal.
- I understand that for my and others’ safety, event staff/advisors may search my baggage and belongings. I will be present if my items are searched and I will know why they have decided to search my belongings.
- I understand that the GOYA event hosts and the GOYA advisors reserve the right to dismiss me from any GOYA event, and to send me home at my parent’s/guardian’s expense.

\_\_\_\_\_  
 Parent’s or Guardian’s Signature Date

\_\_\_\_\_  
 Participant’s Signature Date