

ADULT CHAPERONE VERIFICATION FORM

Steubenville Main Campus 2024 Youth Conferences

Bring your Photo ID; each Adult Chaperone will be verified onsite.

You must present your photo ID in person, on campus, prior to checking in.

*It is important for Franciscan University of Steubenville to use due diligence in providing a safe environment for all participants at the Steubenville Main Campus Conferences. This application assures that an Adult Chaperone is at least 21 years of age (unless otherwise approved by the Conference Office) and agrees to abide by Franciscan University of Steubenville's policies for our Main Campus Youth Conferences. **This page must be completed and legible for each adult chaperone to be admitted on campus.***

NAME: _____ BIRTH DATE: ____/____/____

STREET ADDRESS: _____

CITY: _____ STATE/PROVINCE: _____ ZIP/POSTAL CODE: _____

HOME DIOCESE: _____ NAME OF GROUP LEADER: _____

CONFERENCE: (circle one)

| | | | |
|----------------------|----------------------|----------------------|----------------------|
| Main Campus 1 | Main Campus 2 | Main Campus 3 | Main Campus 4 |
| June 21-23, 2024 | June 28-30, 2024 | July 12-14, 2024 | July 19-21, 2024 |

I affirm that I am at least 21 years of age (or have otherwise been approved to serve as an adult chaperone). By signing this form, I acknowledge that my Group Leader has informed me of the possible sleeping arrangements and conditions, and of the list of recommended things to bring along to make my stay more comfortable. I understand these things are contained in the document 'Group Leader Information Packet' and that I have seen, read, and understand this document in its entirety. Furthermore, I have read and agree to abide by all rules, regulations, and policies of Franciscan University of Steubenville as outlined in said "Group Leader Information Packet" in regard to providing a safe and healthy environment for young people at a Steubenville Main Campus Youth Conference.

Signature of Applicant

Date

Charter for the Protection of Children and Young People

As an authorized representative of the (Arch) Diocese of _____ (name of diocese)

I, _____ (Diocesan Official/Safe Environment Coordinator name), hereby notify the **Franciscan University of Steubenville's Conference Office** that the above named applicant has been background checked and cleared in accordance with the policies of our diocese under the "Charter for the Protection of Children and Young People" as set forth by the United States/Canadian Conference of Catholic Bishops. I understand that no adult will be permitted to attend as a volunteer or participate that has not been cleared by their home diocese and is not named on this declaration.

Diocesan or Parish Seal
(stamp/place within the box)

Signature of Diocesan Official/Safe Environment Coordinator

Date

For questions or concerns, contact us at 740-283-6315.

Form is to be completed by each Adult Chaperone including Group Leader (NOT Priests) and due at Conference check-in