

Please use dark blue or black ink.

Tzafon USY Fall Kallah November 14-16, 2008 Temple Adath Yeshurun, Syracuse, NY

Don't forget to include all signatures!

**Registration Fee: \$160, Syracuse Members: \$140, Second Sibling: \$140
Registration Deadline: October 30, 2008**

This fee includes transportation which will be provided by the Region.

The Region reserves the right to refuse any applications received after October 30, 2008.

A CANCELLATION PENALTY MAY BE INCURRED FOR CANCELLING AFTER 10/30/08

It is recommended that you keep photocopy this form so that you have a copy of the code of conduct and the cancellation policy.

Please complete this form and return it to Tzafon USY: 113 New Krumkill Rd, Albany, NY, 12208. **Make sure all signatures are properly affixed on the form.** Make your check payable to TZAFON USY. **Registration is not complete until we receive full payment.**

TZAFON SCHOLARSHIP FUND DONATION: _____

TOTAL PAID: _____

LAST NAME _____ FIRST NAME _____ GRADE _____ MALE _____ FEMALE _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE #:(_____) _____ E-MAIL _____ SCREEN NAME _____

DOB _____ SYNAGOGUE _____ I HAVE PAID MY USY 2008-2009 DUES: Y N

NAME OF MOTHER & FATHER/GUARDIAN (_____) (_____) (_____) HOME PHONE CELL PHONE

EMERGENCY NAME (NOT PARENT) (_____) (_____) HOME PHONE CELL PHONE

PLEASE CHECK THOSE PARTS OF THE SERVICE YOU ARE ABLE TO LEAD:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> WEEKDAY SHACHARIT | <input type="checkbox"/> TORAH SERVICE | <input type="checkbox"/> PRAYER FOR ISRAEL HEBREW | <input type="checkbox"/> SHABBAT SHACHARIT |
| <input type="checkbox"/> WEEKDAY MINCHA | <input type="checkbox"/> TORAH READING | <input type="checkbox"/> KIDDUSH SAT. LUNCH | <input type="checkbox"/> SHABBAT MUSAF |
| <input type="checkbox"/> WEEKDAY MA'ARIV | <input type="checkbox"/> HAFTORAH | <input type="checkbox"/> SHABBAT MINCHA | <input type="checkbox"/> HAMOTZI |
| <input type="checkbox"/> KABBALAT SHABBAT | <input type="checkbox"/> G'LILAH | <input type="checkbox"/> SHABBAT MAARIV | <input type="checkbox"/> HAGBAH |
| <input type="checkbox"/> P'SUKAI D'ZIMRAH | <input type="checkbox"/> ALIYAH | <input type="checkbox"/> PAGE CALLING | <input type="checkbox"/> HALLEL |
| <input type="checkbox"/> I AM A _____ KOHEN _____ LEVI _____ YISRAEL | <input type="checkbox"/> BIRKAT HAMAZON | <input type="checkbox"/> GABBAI | <input type="checkbox"/> KIDDUSH FRI. NIGHT |

All males must bring kippot tallit and tefillin. Females who wish to bring tallit and tefillin are encouraged to do so.

HOUSING PREFERENCES: Although we do try to accommodate all housing requests, these are not guaranteed.

1 _____ 3 _____

2 _____

Health Insurance Provider: _____ Group/Member Number: _____ Name of Insured: _____

Dietary Needs: Vegetarian Lactose Intolerant Other _____

Do you have any medical conditions or special needs (including allergies)? Yes No

If Yes, please list condition, medication/treatment, and dosage: _____

PLEASE NOTE: Do not omit any information – acceptance to the program is not based on the health history. **All Medical records are private and confidential.**

MEDICAL POLICY: In case of medical and/or surgical emergency, I hereby give permission to the physician selected by the regional director or his or her designee to hospitalize, secure proper treatment for, and/or order injections, anesthesia, or surgery for my child. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

USYER'S SIGNATURE _____ PARENT'S SIGNATURE _____

TZAFON USY/ KADIMA REGIONAL ACTIVITIES CODE

As a USYer, I promise that I will uphold the standards of USY. I will respect others and myself. I understand that if I fail to abide by the standards set forth here disciplinary action may be instituted. Accordingly, I acknowledge that I have reviewed and that I agree to the following rules of conduct. **Please review and initial each statement.**

1. _____ Under no circumstances will I engage in any illegal conduct, including, but not limited to, acts of battery and assault, shoplifting or the destruction or damaging of the property of an individual or an entity.
2. _____ Under no circumstances will I possess or use tobacco of any kind, illegal non-prescription drugs, or alcohol at any function.
3. _____ I will maintain proper behavior with regard to interpersonal relations, including language and personal attire.
4. _____ I will refrain from engaging in any inappropriate sexual behavior, including but not limited to actions, which may be perceived by reasonable persons to be sexually harassing in nature.
5. _____ I will observe Kashrut and Shabbat in accordance with the practices as defined by the Law and Standards Committee of the Rabbinical Assembly.
6. _____ If I am male, I will wear my kippah at all functions. If I am Bar Mitzvah, I will wear tallit and t'fillin when appropriate. If I am female I understand I may do so if it is my custom.
7. _____ I will attend the event in its entirety unless excused in advance by the Regional Youth Director. I understand that Shabbat (Friday night and Saturday) must be attended in its entirety.
8. _____ I will not enter a room or area designated or assigned for exclusive use by members of the opposite sex.
9. _____ I will assume all responsibility for any damage to property that may be caused by my actions, intentional or not, including costs of repair or replacement of said property.
10. _____ I will use only approved USY transportation to, from, and during any USY event. I understand that no USYer may ride in a car driven by a (USY or non-USY) high school student to, from, and during any Regional event.
11. _____ I will reside only in my assigned housing and I will abide by the curfew.
12. _____ I understand that only USYers registered for the event will be permitted to participate.
13. _____ I will listen to and cooperate respectfully with staff and my host family at all times.
14. _____ I will take part only in activities that are authorized by the Regional Youth Director and supervised by event staff or the Regional Youth Director's appointee.
15. _____ I will refrain from initiating any derogatory or negative behavior towards another participant.

OFFENSES WHICH WILL RESULT IN MY BEING SENT HOME /REMOVED FROM REGIONAL OFFICE AND /OR BARRED FROM ATTENDING FUTURE REGIONAL/NATIONAL EVENTS

16. _____ I understand that my violating any of the commitments set forth below will result in disciplinary action which WILL include my being sent home at my parents' expense (after Shabbat has ended); my suspension from one or more regional activities including, but not limited to any Tzafon Kadima/USY event, for which I am eligible, leading up to and including the next Tzafon Regional event and/or my immediate removal from any regional executive or extended board position in which I serve. These infractions include:
 - a. engaging in **any** illegal conduct, including, but not limited to, acts of battery and assault, shoplifting, destroying or damaging the property of an individual or an entity.
 - b. possessing or using, illegal non-prescription drugs, or alcohol at any function.
 - c. engaging in any inappropriate sexual behavior, including but not limited to actions which may be perceived by reasonable persons to be sexually harassing in nature.
17. _____ If a USYer is apprehended for an infraction of the International Youth Commission's policy regarding drug and alcohol abuse or any other criminal offense (including, but not limited to shoplifting) punishment for that offense will include suspension from International USY events (including, but not limited to the International USY Convention and USY Summer Programs) for one year following the infraction. The USYer's region reserves the right to impose additional sanctions in connection with this or any other improper behavior, as it sees fit.
18. _____ I understand that 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. The regional Youth Director, in consultation with the Regional Youth Commissioner, 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.

DUE PROCESS

19. _____ I understand that upon learning that I may have committed any of the infractions as set forth above, the Regional Youth Director, or his/her designee will discuss such violations with me. I further understand, that for acts of misconduct as set forth in paragraph 15 above, my parents will immediately be informed by telephone, if possible, (unless it is Shabbat, in which case, my parents will be notified immediately thereafter).
20. _____ I further understand that the Regional Youth Director, prior to determining the appropriate disciplinary action to take, will, if feasible, confer with the Regional Youth Commission Chairman as well as an individual from the professional staff of the United Synagogue of Conservative Judaism and/or a lay leader from the Board of Directors of the Empire Region. I also understand that the Regional Youth Director will, in a timely fashion, inform my Chapter Advisor/Youth Director, and provide a letter explaining the code infraction and disciplinary action taken to me, my Rabbi, Advisor/Youth Director, Youth Commission Chairman, and parents.

I have read, and agree to the above CODE OF CONDUCT.

Signature of USYer

Signature of Parent