



TZAFON UNITED SYNAGOGUE YOUTH

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USY Director
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February 22, 2005
13 Adar I 5765

Shalom Tzafon!

Believe it or not, the year is halfway over, but fear not because Tzafon has FOUR more incredible events planned for you!!! After an amazing Winter Kallah in Albany and fabulous Spring Kallah in Pittsfield, the usually long stretch between Spring Kallah and Kinnus Gadol (Regionals) will be broken by the first ever Tzafon Tikun Olam Dance-a-thon on April 9, 2005!!!!

On this night, Tzafon USYers will gather in the Albany JCC after Shabbat ends. The starting time of the dance-a-thon is yet to be determined but you will soon be notified with this information. The dance-a-thon will last all night long proceeding into Sunday morning April 10. A pick-up time will also be announced in a later mailing.

The cost for this event will be no less than \$35 not including transportation. USYers will also be asked to collect sponsors for this event. Sponsors can either pledge an amount to donate per song that a USYer will dance to, or pledge a flat donation. All proceeds will go to Tikun Olam, USY's umbrella tzedakah organization.

More details will follow shortly. For now, save the date, get excited, get donations, and put on your dancing shoes!! See you April 9!! **USYers are NOT allowed to drive themselves (you must travel via public transportation or parent carpool).**

B'hava,
Judith Simons
Tzafon SATO VP 2004-2005

HONORARY PRESIDENTS: Omri Levin, Andrew Friedson, Sarah Kay, Rachel Brenner, Jaclyn Siskind, Rebecca Saat, Rachel Arcus, Joseph Zeidner, Jennifer Richardson, Hannah Feinberg, Jason Judd, Jessica Kaplan, Tamar Siltan, Akiva Siltan, Joshua Kanter, Jeffrey Scheer, Gary Susswein, Michael Sherman, Bobbi Berenbaum, Chaim Singer, Meir Sherer, Barry Safeer, Andrea Lipton, Robert Freeman, Daniel Lehmann, Ethan Kanter, Lesley Pearl, Joyce Stein, Brian Harding, Robbin Feibus, Richard Lehmann, Howard Goldenberg, Hillary David Ring, Howard Stern, Wallace Schwartz, David Schwartz, David Feisterstein, Sanford Schwartz, Paul Ruffer, Carol Wolkin, David Getelson, Marcia Greenman Lebeau, Arnold Hammer.

Please use dark blue or black ink.

S.A.T.O. Dance – A - Thon
April 9-10, 2005
Albany JCC

Don't forget to include all signatures!

Cost: The minimum amount for attendance is \$35.

This form and at least a \$35 check to Tzafon USY MUST be postmarked NO LATER than March 21st, 2005 (THIS IS A FIRM DEADLINE)
Please keep in mind that this is a minimum and more is encouraged.

TRANSPORTATION IS THE RESPONSIBILITY OF THE PARTICIPANTS

USYers are NOT ALLOWED to drive themselves

Faxed applications will not be accepted.

Please complete this form and return it to Tzafon USY: P.O. Box 8687, Albany, NY, 12208. Make sure all signatures are properly affixed on the form

LAST NAME: _____ FIRST NAME _____ GRADE ____ MALE ____ FEMALE ____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____ CHAPTER _____

PHONE #:(____) _____ E-MAIL _____ SCREEN NAME _____ D.O.B. _____ PAID 2003-04 DUES: Y N

NAME OF PARENT/GUARDIAN _____ (____) _____ (____) _____ (____) _____
HOME PHONE BUSINESS PHONE CELL PHONE

EMERGENCY NAME (NOT PARENT) _____ (____) _____ (____) _____
HOME PHONE BUSINESS PHONE

VEGETARIAN ____ VEGAN ____ FISH ____ SPECIFY ANY FOOD OR OTHER ALLERGIES _____

HEALTH INSURANCE CO. AND # _____ NAME OF INSURED _____

____ Parents, please check and initial. My child has permission to take for mild discomforts: __ Acetaminophen __ ibuprofen __ Pepto Bismol __ call me first

If your child has any medical problem (s) we should be aware of attach a note to this form. If there is any change prior to the event, please notify the regional office.

SPECIAL NEEDS _____ ALLERGIES _____ ALLERGIES TO MEDICINE _____

CURRENT MED & REASON TAKING MED _____ CHECK IF SENT _____ NAME OF DOCTOR _____ (____) _____
PHONE

SONG REQUESTS _____

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.

____ (PARENT INITIALS) I understand that my USY participant MAY NOT drive his/herself to this event and he/ she will be traveling to Albany by (Check one): _____ Parent Carpool _____ Public Transportation

Please include details: _____ (ANY CHANGES MUST BE IN WRITING TO THE REGIONAL OFFICE BY APRIL 7, 2005)

PARENT SIGNATURE _____ ADVISOR'S SIGNATURE _____

This form is to be mailed to the regional office by March 21st. The sponsor sheets can either be mailed in or brought to the event. Please make sure that you have remaining sponsored money with you at the time of the event.



SATO DANCE - A - THON TZAFON USY



P.O. Box 8687 Albany, NY 12208
(518) 438-2052 Fax (518) 438-2053
<http://www.tzafon.org>

Please make checks payable to: Tzafon USY

Name: _____ Phone: _____ Chapter: _____

Address: _____ City: _____ State: _____ Zip: _____

	<u>Name:</u>	<u>Address:</u>	<u>Phone#</u>	<u>Flat Donation: or</u>	<u>Pledge Per Dance:</u>	<u>Amount Paid:</u>
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	<u>Name:</u>	<u>Address:</u>	<u>Phone #</u>	<u>Flat Donation:</u>	<u>Pledge Per Dance:</u>	<u>Amount Paid:</u>
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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 below that disciplinary action may be instituted. Accordingly, I acknowledge that I have reviewed and agree to the following rules of conduct:

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 always 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's my custom.
7. I will attend the event in its entirety unless excused in advance by the Regional 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 to 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 Director and supervised by event staff or the Regional Directors appointee.

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

15. 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/international 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; the International USY Convention and USY summer programs) for one year following the infraction; 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.

DUE PROCESS

16. I understand that upon learning that I may have committed any of the infractions as set forth above, the Regional 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).
17. I further understand that the Regional 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 Director will, in a timely fashion, inform my Chapter Advisor/Youth Director, and provide a letter explaining the code infraction and disciplinary action to me, my Rabbi, Advisor/Youth Director, Youth Commission Chairman, and parents. In accordance with National Youth Commission Policy, it is also understood that the Regional Youth Commission has the right to appeal specific cases to the Chairman of the National Youth Commission if I am apprehended for an infraction of the National Youth Commission's Policy.

USYer/ Kadimanik signature

Parent's signature