



2019

**Diocese of North America & Europe of the Mar Thoma Church  
Alabama Native American Mission –  
Leadership Summit & Vacation Bible School (VBS) Camp 2019**  
Saturday, June 15 – Friday, June 21, 2019 in Mt. Vernon, Alabama

**Vacation Bible School Camp 2019**

**Location:** Aldersgate United Methodist Church,  
20145 Richard Weaver Road, Mt. Vernon AL 36560

**Events:** **June 15:** Street Store, VBS prep

**June 16:** Sunday worship, VBS prep

**June 17 – June 21:** VBS for children during the morning and youth in the evening with bible classes, evangelism, music festival, witness meetings, medical mission, Native American Pow Wow, etc.

**To be a volunteer you need to:**

- Be at least 18 years old, at the time of signing the registration form, to participate in the trip. Delegates below 18 must have the presence of parents/designated guardian.
- Complete registration form and Waiver Form to participate in the mission trip.
- Be willing to lead various tasks, not limited to, but including: teaching lessons, music ministry, devotional messages, crafts, cooking, manual work, sports, and above all, communicate God's love and the Gospel of Jesus Christ to all. Your full participation and commitment is vital.
- About 120 children - age ranging 5-18 years old and about 20 adults are expected in the program. This is an opportunity to engage in evangelism, visitation, witnessing in the community, sharing faith and culture, and learning more about Native American youth and their struggles.

**Travel:** Volunteers need to make arrangements for travel to/from Mt. Vernon, Alabama (if flying, to Mobile, AL (MOB) or Atlanta, GA (ATL) airport) by June 15. Local transportation, food, modest accommodation, and travel to/from Mt. Vernon, AL to/from the airport will be arranged by the mission. Any arrangements beyond the return to origin are the sole responsibility of the volunteer. If you are flying, you are asked to contact Joby Mathew (joby.mathew.13@gmail.com), Elias Babu (eliasbabu.atl@gmail.com), or Julianne Cherian (jssccherian@gmail.com).

**Please be sure to bring:**

Enough clothes for one week, necessary medicines, personal hygiene/grooming items, toiletries, bible, sneakers, hat, hand sanitizer (pocket size), appropriate swimwear, and flip flops. The weather is expected to be warm, as it is summer time. Please wear appropriate clothing for mission activities and DO NOT bring any personal valuables with you.

*For more information, please contact Rev. Viju Varghese, Convener (214) 714-1073,  
Joby Mathew (267) 205-7179, Elias Babu (404) 401-3321, or Julianne Cherian (973) 563-8430*

**REGISTRATION DEADLINE: Sunday, May 12, 2019**

**\*\*\*Applications received thereafter may not be accepted, due to policy requirements.\*\*\***

2019



**Diocese of North America & Europe of the Mar Thoma Church**

**Alabama Native American Mission –  
Leadership Summit & Vacation Bible School (VBS) Camp 2019**

June 15-21, 2019 in Mt. Vernon, Alabama

**REGISTRATION FORM 2019**

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address:

Date of Birth: \_\_\_\_\_ Gender: \_\_\_ Male \_\_\_ Female \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Professional Status: Student \_\_\_\_\_ Employed \_\_\_\_\_ Unemployed \_\_\_\_\_

List **any and all** food/medical allergies and health conditions: \_\_\_\_\_

***Health Insurance Information:***

Health Insurance Provider:

Policy Number:

***Emergency Contact Information:***

Name: \_\_\_\_\_ Relationship:

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Acknowledgment and Consent**

*I agree to abide by the rules of the Alabama Native American Mission Leadership Summit & Vacation Bible School (VBS) Camp 2019 – mission trip in the interest of preserving a desirable Christian environment. I have read the attached code of conduct and understand that **any infraction** of the code of conduct will result in my immediate expulsion from the mission trip. I have read, signed and returned the attached Waiver/Release of Liability form with this registration form. I am at least 18 years of age.*

Volunteer Signature:

Date: \_\_\_\_\_

**Endorsement of the Parish Vicar**

Name of Vicar & Parish:

Signature of Vicar: \_\_\_\_\_

**Alabama Native American Mission Leadership Summit &  
Vacation Bible School (VBS) Camp 2019**

**Code of Conduct**

1. I agree that I have registered and filled the waiver form, and I agree with all that is written on it.
2. I will speak and dress appropriately, understanding that this is a Christian mission trip.
3. I will not invite or entertain or bring anyone else who is not registered.
4. I will not bring expensive valuables, as I am responsible for securing them.
5. I will not bring any musical/video equipment or any other items which are inappropriate for the mission trip.
6. I will limit my presence to authorized areas.
7. I will not put anyone else at risk through my actions.
8. I am responsible for securing my own safety and health.
9. I will follow the direction, and obey the instructions of the coordinators and organizers of the Native American Mission.
10. I will come prayerfully, with an open heart and mind, to learn, and to lead and serve Christ through the mission.

**Additional Notes:**

- All volunteers **MUST** be at least eighteen (18) years of age **AND** complete this Waiver/Release of Liability form in **FULL** prior to participation in the **Alabama Native American Mission Leadership Summit & Vacation Bible School (VBS) Camp 2019**.
- You may be asked to fill out/sign more forms, as per the camp policy. If any further paperwork is needed, we will contact you.
- The attached form (page 4 & 5) should be filled for volunteering to participate in the **Alabama Native American Mission Leadership Summit & Vacation Bible School (VBS) Camp 2019 (“the program”)** hosted the Native American Mission of the Diocese of North America & Europe (“the Diocese”) of the Mar Thoma Church.

This application can be submitted in any of the following ways:



1. Fill in pdf format, sign, and email to: **AlabamaNAM@gmail.com**
2. Fill out, scan, sign, and email to: **AlabamaNAM@gmail.com**
3. Fill out application, sign, and mail to:  
Rev. Viju Varghese, 3404 Ashleaf Dr, Carrollton, TX 75007  
Applications must be received before May 12, 2019

**\*\*\*ALL PARTICIPANTS MUST COMPLETE THE ATTACHED WAIVER FORM\*\***

**Diocese of North America & Europe of the Mar Thoma Church**  
**Release of Liability Form**

Participants younger than 18 years must have parent/guardian's signature

**(PLEASE READ CAREFULLY BEFORE SIGNING)**

I, \_\_\_\_\_, a member of the \_\_\_\_\_ parish of the Mar Thoma Church under the Diocese of N. America & Europe, hereby acknowledge that I freely and voluntarily wish to participate in the **Alabama Native American Mission Leadership Summit & Vacation Bible School (VBS) Camp 2019** of the Diocese, hosted by the **Native American Mission** of the Diocese to be held from **June 15, 2019 to June 21, 2019** at **Mt. Vernon, AL**.

I hereby acknowledge that my participation is completely voluntary and that I chose to participate in the program fully knowing that I would be required to sign this Release of Liability. I further acknowledge that I understand that I must secure my own health and/or accident insurance at my own expense to be effective during the participation in the program. In consideration of the privilege to participate in the program and recreational activities during the program, I have fully read this Release of Liability and hereby execute this Release of Liability with the intent to bind myself, my heirs, assigns, and legal representatives. I further state that I am at least 18 years of age and competent to sign this affirmation and release, or that my parent/guardian has signed below if I am younger than 18 years of age.

I understand and agree that the Diocese or the hosting parish or organization or Diocese may provide transportation to participate in the program or during the program for some of its activities. If I accept transportation provided by the Diocese, hosting parish or organization, I understand and agree that I do so at my own risk. Moreover, I acknowledge and understand that I am not required to accept such transportation, if such an option is provided, that I may provide my own transportation to participate in the program. I also understand that I may have the option not to participate in any activities or use the transportation including in the water during the program that may cause any risk to my life, health or safety both physical or mental.

Further, I understand and agree that the participation in certain aspects of the program including accepting transportation by road or by water may be physically and emotionally demanding that I understand that I face the risks of accidental and/or other physical or emotional injuries. These risks include, but not limited to. 1) loss or damage to personal property, 2) injury or fatality to and/or related to the following: (a) travel to, from, and/or during the program; (b) activities during the program, including but not limited to damage or impairment to my general health and/or emotional well being. I have fully understood and aware that the nature of the program or its contents may cause injuries or impairments for me both physically and mentally. Nonetheless, I voluntarily choose to participate in the program and its activities and assume the risk involved due to my participation in the program. Further, I acknowledge that I am in good physical and mental condition, and I do not possess, nor I am aware of any physical or mental impairments or disabilities that might limit my participation in the program.

I EXPRESSLY AGREE AND INTEND THAT I PARTICIPATE IN THE PROGRAM AT MY OWN RISK AND THAT NEITHER THE DIOCESE, OR THE HOSTING PARISH OR ORGANIZATION,

ITS TRUSTEES, OFFICERS, COMMITTEE MEMBERS, EMPLOYEES, AGENTS OR ASSIGNS SHALL BE LIABLE FOR ANY INJURIES, DAMAGES, CLAIMS, DEMANDS, ACTIONS OR CAUSES OF ACTION WHATSOEVER WHICH MAY ARISE OUT OF OR IN CONNECTION WITH MY PARTICIPATION IN THE PROGRAM, WHETHER FROM ACTS OF ACTIVE OR PASSIVE NEGLIGENCE ON MY PART AND/OR ON THE PART OF THE DIOCESE, HOSTING PARISH OR ORGANIZATION, ITS TRUSTEES, OFFICERS, COMMITTEE MEMBERS, EMPLOYEES, AGENTS OR ASSIGNS, AND I DO HEREBY FOREVER RELEASE, DISCHARGE, INDEMNIFY, HOLD HARMLESS AND WILL DEFEND THE DIOCESE, HOSTING PARISH OR ORGANIZATION, ITS TRUSTEES, OFFICERS, COMMITTEE MEMBERS, EMPLOYEES, AGENTS, OR ASSIGNS FOR ANY SUCH INJURIES, DAMAGES, CLAIMS, DEMANDS, ACTIONS OR CAUSES OF ACTION WHETHER PRESENT OR FUTURE, KNOWN OR UNKNOWN.

The terms of this Release of Liability shall be governed by and construed under the laws of the State where this release has been signed by me. In the event any term or provision of the Release of Liability is found to be unenforceable or declared void in whole or in part by any competent of court of law, the concerned clauses shall be construed as valid and enforceable to the maximum extent permitted by law, and the remaining clauses of this Release of Liability shall remain in full and effect as if such unenforceable or void clause was not there in the first place. Further, I agree that the exclusive venue for any dispute arising between Diocese, hosting parish or organization and me involving any terms and conditions of this Release of Liability shall be the county where in I reside permanently and/or signed this release by me.

Accepted and agreed by:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Place: \_\_\_\_\_

Participant's Printed Name Phone: \_\_\_\_\_

Cell Phone No: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

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**(A parent or legal guardian must sign below if any participant is not 18 years of age)**

I certify that I am the parent or legal guardian of the above named participant in the program of the Diocese hosted by the parish or organization. I have read the above release, and I assent to its terms and conditions. I acknowledge that my dependent and I have agreed to the terms and conditions, and I hereby give my consent to my dependent's participation in the program, under the above terms and conditions,

\_\_\_\_\_  
Name of parent or legal guardian

\_\_\_\_\_  
Relationship:

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of the parent or legal guardian

Place: \_\_\_\_\_