



Senior High Registration Form

Please Print Clearly

<p>Group Information: This is the address where all correspondence will be sent to the SSP Liaison.</p> <p>_____</p> <p>Group/Church Name</p> <p>_____</p> <p>Church Address</p> <p>_____</p> <p>City State Zip</p> <p>_____</p> <p>()</p> <p>Church Phone</p> <p>_____</p> <p>Church E-mail</p> <p>_____</p> <p>Church Website</p> <p>_____</p> <p>Contact Person's relationship to group/church (i.e. youth leader, parent, pastor, etc.)</p>	<p>Liaison Contact Information: This person is responsible for all communication with SSP, as well as with parents, youth, and other volunteers.</p> <p>_____</p> <p>Contact Person Name</p> <p>_____</p> <p>Home Address</p> <p>_____</p> <p>City State Zip</p> <p>Check which is the best number to reach you at.</p> <p><input type="checkbox"/> () _____ Home Phone</p> <p><input type="checkbox"/> () _____ Cell Phone</p> <p><input type="checkbox"/> () _____ Work Phone</p> <p>_____</p> <p>Personal E-mail</p>
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Please Reserve Spaces For:

Youth _____ + Counselors* + _____ = Total _____ x \$60 Deposit = \$ _____ (Amount enclosed or processed by credit card over the phone)

*The ratio of 5 youth to 1 adult is required.

Site & Date Choices:

Please indicate as many prioritized choices as you are willing to accept (1st, 2nd, 3rd . . . 8th, etc.) but not less than three.

	Los Angeles CA	Susanville CA	Coarsegold CA	McDermitt NV	Navajo Nation AZ	Fort Hall ID
Week 1 7/1 – 7/7	_____	_____	X	_____	_____	_____
Week 2 7/8 – 7/14	_____	_____	_____	_____	_____	_____
Week 3 7/15 – 7/21	_____	_____	_____	X	_____	_____
Week 4 7/22 – 7/28	_____	_____	_____	_____	_____	_____
Week 5 7/29 – 8/4	_____	_____	_____	_____	_____	_____
Week 6 8/5 – 8/11	_____	_____	_____	_____	_____	_____

<p>Turn this page over to complete the registration form. </p>	<p style="text-align: center;">SSP Office Use Only:</p> <p><input type="checkbox"/> Check #: _____ Date: _____</p> <p><input type="checkbox"/> Credit card payment over phone Amount: _____</p>
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Contract Between Your Group/Church and Sierra Service Project:

- We have read and understand SSP's policies regarding fee payment according to the following schedule:

Payment Type	Due Date	Amount
Deposit	At registration to hold spaces	\$60 per participant
2 nd Payment	March 1 st , 2012	\$200 per participant
Final Payment	June 1 st , 2012	\$100 per participant (\$65 for new groups)

- We understand that late 2nd or final payments will be charged a 10% late fee per group. We also understand that if we do not submit our 2nd payment on time we risk having our reservation canceled.
- We understand that all payments are **nonrefundable**.
- We have read and understand the enclosed information regarding the registration process, 1:5 counselor to youth ratio, and age group eligibility (only youth entering 9th grade through those who just graduated 12th grade) and agree to follow it.
- We understand that if our group is over 30 persons that we must divide into separate groups.
- We understand that all additions to registration numbers must be approved in advance to the group's arrival at SSP.
- We understand that our group is required to provide its own transportation to the site and to the project sites throughout the week where the work will be performed.
- We understand that volunteers are not covered by Workers' Compensation and that each participant, both youth and adult, is responsible for his/her own medical expenses while at the project.
- We attest that all of our adult volunteers have undergone, or will undergo prior to the summer, a national criminal background screening process. We confirm that our adult volunteers are suitable to work with youth.
- We understand that the contact listed is the only liaison between SSP and your group. If this person changes, SSP needs to be notified with updated contact information.
- We understand that email is the primary mode of communication between SSP and the Group Liaison listed on the front of this form.

SSP Liaison's signature: _____

Date _____

Pastor's signature*: _____

Date _____

**Pastor's signature is required for new and returning churches to ensure the church agrees to the contract listed above.*

Make a copy for your records and mail or fax completed Registration Form to:

Sierra Service Project
P.O. Box 992
Carmichael, CA 95609
Fax: (916) 484 - 0917