

June 15 - June 23, 2024

#RTHChicago2024

# **Student/Minor Application**

This application is only for students age 18 or younger who are outreach participants and live with a parent/guardian.

Only for students completing grades 9 - 12 in the Spring of 2024.

Any leader or participant age 19 or older (or 18 year olds who live independently)

must complete the adult app.

Registration Deadline: April 26, 2024

### **Registration and Payment**

TOTAL	INCLUDED	NOT INCLUDED  (This is at your own expense. We suggest bringing about \$200.00)
\$600.00* (Make checks payable to Reach the Heart)	<ul> <li>Transportation</li> <li>Housing</li> <li>Meals on June 16-21</li> <li>4 Ministry Shirts</li> </ul>	<ul> <li>Meals for all travel days (June 15 &amp; 23)</li> <li>Meals ALL day June 22</li> <li>L Train pass for the entire day on June 22 (utilize and download Chicago's public transportation app Ventra for this day)</li> </ul>

#### \*Applicants Registering with a Church Group:

- Please hand in your application and send all payments to the church you will be attending with.
- Do adhere to the church's deadline you are registering with.
- We will not accept payment for applicants attending with church groups.

DUE DATE	REGISTRATION REQUIREMENTS  All applications will be treated on a first-come, first-served basis.		
April 26, 2024*	<ul> <li>□ Application (must entirely complete the following):         <ul> <li>□ Participation Information</li> <li>□ Participant Questionnaire</li> <li>□ Reach Chicago Guidelines</li> </ul> </li> <li>(The following must be completed by a parent or legal guardian of student applying)</li> <li>□ Parental Consent, Certification, and Medical Authorization</li> <li>□ Medical Questionnaire</li> <li>□ Consent, Certification, and Assumption of Risk</li> <li>□ Medical Treatment Authorization</li></ul>		
MAY 24, 2024*	\$400.00 NON-REFUNDABLE REMAINING BALANCE (Make checks payable to Reach the Heart) A late fee of \$25.00 (for all unpaid balances after the due date, equaling a non-refundable remaining balance of \$425.00) If full payment was received on the first due date, this date does not apply.		

#### Please send all pages listed above fully completed and to the following address:

Reach the Heart Attn: Reach Chicago P.O. Box 10265 Fargo, ND 58106

Receipt of application at any time does not guarantee acceptance. Students will be notified via email when they have been accepted. Please add <a href="mailto:reachtheheartoffice@qmail.com">reachtheheartoffice@qmail.com</a> to your contacts to prevent missing important information.

If for any reason you are NOT accepted to attend Reach the Heart's Reach Chicago trip, your deposit will be returned to you. However, your deposit and any remaining balance will not be returned to you if you are accepted, but choose to not attend. YOU MUST notify Reach the Heart at reachtheheartoffice@gmail.com or by calling (701) 446-8342 if you choose to no longer attend.

If your church sends a donation to help make it possible for you to attend this trip, please make sure that they specify for whom they are sending money.

## **Packing List**

The following guidelines are to be followed by every participant. Do not hand in this list with your application. Due to limited space, ALL students & adults are only allowed ONE SUITCASE/BAG & ONE PURSE/BACKPACK!

PACK THIS	<ul> <li>Clothing for 9 days (the following are non-negotiable and must be followed):         <ul> <li>LONG shorts (mid-thigh or longer)</li> <li>Crew neck T-shirts (may get dirty/ruined, cropped tops prohibited)</li> <li>Pants for work projects (old jeans, old gym shorts, etc.)</li> <li>Socks &amp; Underwear for 9 days</li> <li>2 pairs of tennis shoes (required for all ministry activities)</li></ul></li></ul>
OPTIONAL	<ul> <li>□ Cell phone &amp; charger (Instructions of use will be announced on the trip)</li> <li>□ Ear pods/headphones (not allowed to have during work projects, VBS, or evening rallies)</li> <li>□ Flashlight</li> <li>□ Dirty clothes bag</li> <li>□ Sunscreen</li> <li>□ Sunglasses (not allowed during work projects, VBS, or night rallies)</li> <li>□ Bug repellant</li> <li>□ Bathing suit (must be modest) &amp; towel if you plan to swim at the lake on free day</li> </ul>
PROHIBITED	<ul> <li>Knives (all types and all sizes)</li> <li>Weapons of any type, including chains, knives, firearms, and spiked jewelry</li> <li>Alcohol, drugs, illegal substances, or any paraphernalia associated with drug use</li> <li>Pepper spray/Mace</li> </ul>

\*Do not bring anything too valuable. If you do bring valuables, **you are responsible to hide them in your luggage when they are not in use**. Do not leave items lying around unattended.

WE ARE NOT RESPONSIBLE FOR YOUR LOST OR STOLEN ITEMS.

## Clothing

The following clothing guide is for everyone – students and adults, both guys and girls.

All participants not adhering to the guidelines the Outreach leadership has set will be required to change. At all times, modest dress is required! We are representatives of Christ and should provide a great example to those around us. We do not want to bring attention to ourselves but rather to what we are doing.

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SHOES	<ul> <li>Open-toed shoes, such as SANDALS (flip flops, camping/hiking style sandals, etc.) ARE NOT PERMITTED DURING WORK PROJECTS, VBS, OR NIGHT RALLIES. This is for your safety.</li> <li>Please wear closed-toed shoes/sneakers.</li> <li>We insist on this and will require you to change.</li> </ul>
SHIRTS, SWEATSHIRTS, AND JACKETS	<ul> <li>Modest shirts must be worn at all times - for both guys and girls!</li> <li>Shirts/t-shirts with sleeves should be worn during all ministry times.</li> <li>Modest tank-tops can be worn during work projects and days off.</li> <li>No tight, see-through, crops or low-cut shirts.</li> <li>Under no circumstances are you allowed to cut off the sleeves of the ministry shirts we provide!</li> <li>Sweatshirts and jackets are allowed <u>ONLY UNDERNEATH</u> ministry shirts if the weather is wet or cold.</li> <li>(Because you are on a mission trip, the people we minister to and the leadership need to be able to identify you by your shirt. We insist on this rule and will ask you to remove your sweatshirt or jacket.)</li> </ul>
SHORTS/PANTS	<ul> <li>Shorts must be long enough to cover your butt well, <u>even when bending over</u>. Shorts/pants must also be high enough to cover your underwear <u>even when bending over</u>. <u>Biker shorts are prohibited</u>.</li> <li>Ministry and work projects will have a lot of bending! ;)</li> <li>Yoga pants and leggings (with longer shirts) <u>are only acceptable for travel days and the free day</u>.</li> </ul>
ACCESSORIES	<ul> <li>Bandanas, or headbands that mimic bandanas, are only acceptable for work projects (for sweat control) and are not allowed during ministry times - including as hair accessories.</li> </ul>
CHANGING	<ul> <li>Changing must not be done in public areas or areas that are accessible by the other gender.</li> <li>Change in the restrooms/shower area.</li> </ul>
WORK CLOTHES	<ul> <li>Bring work clothes!</li> <li>There are a variety of work projects, such as cleaning, lawn care, and painting. Wear clothes you will not care about ruining.</li> </ul>

## Itinerary

Saturday June 15, 2024	6:00 AM: Meet in Fargo. Meeting location will be communicated in the acceptance email.  Arrive in Chicago around 8:00 PM to 9:00 PM
	Morning: Prayer & witness walk
Sunday	Morning to afternoon: Service at Chicago City Life Center (5501 S La Salle St., Chicago, IL 60621)
June 16, 2024	Afternoon: Lunch, team assignments, and week overview
	Evening: Dinner and evening hang out at church
Monday	Morning: Breakfast, worship, and service
June 17, 2024	Morning to afternoon: Various work projects
through Friday	Afternoon: Lunch and VBS (Vacation Bible School)
June 21, 2024	Evening: Dinner and evening rallies
Saturday June 22, 2024	Day off / Free day: Taking the day off and heading into the city of Chicago to spend the day in groups with chaperones/leaders doing various activities (tourist attractions, Lincoln Park Zoo, museums, baseball games, shopping, etc.) Please see below for direction on spending money Evening: Everyone will meet at one central location and head back to the church
Sunday June 23, 2024	Depart Chicago at approximately 8:00 AM Arrive in Fargo around 9:00 PM - 12:00 AM (midnight) depending on the length of time spent on travel stops

All regular meals Sunday - Friday (breakfast, lunch, dinner) will be provided.

## **Spending Money**

SUGGESTED AMOUNT	AT THE EXPENSE OF EACH PARTICIPANT
Around \$200.00	<ul> <li>Spending Money Participants Will Need:</li> <li>Meals for all travel days (June 15 &amp; 23, approximately \$10 - \$15 per meal)</li> <li>Any activities participants choose to participate in outside of the outreach Mon Fri. (snack, coffee, etc.)</li> <li>Meals ALL day June 22 <ul> <li>Approximately \$15-\$30 per meal</li> </ul> </li> <li>L-Train Transportation: to and from downtown Chicago for the entire day on June 22 (~\$10.00-day pass to be used for the L-Train system and city buses)</li> <li>Optional Spending Money</li> <li>(Prices are approximate. This is not required money. You will only need it if you wish to participate in the activities listed below. If you cannot afford these "extras," don't worry, you will still have a GREAT TRIP!):</li> <li>Willis Tower (2nd tallest building in the nation): \$30-\$44</li> <li>Entrance to a baseball game (White Sox or Chicago Cubs): \$50.00 - \$100.00+</li> <li>Museums (Shedd Aquarium, Science Museum, etc.): \$25.00+</li> </ul>

# **REACH THE HEART**

### **REACH CHICAGO APPLICATION - 2024**

## Student/Minor Application

Do not skip over ANY information • All applications must be written in BLACK/BLUE ink

		Partici	pant I	nformatioi	n			
oday's Date:								
egal Name: (First)			_ (Middle I	nitial) (L	_ast)			
ate of Birth:								
urrent Grade:	(All p	articipants are requi	red to have	completed 9th gra	de for the	current scho	ol year)	
ddress: (Street) _		(City)			(State	e)	(Zip)	
elephone: (Home)								
		n/balance info):						
ther/Guardian Na	ame: (First)		(Last) _			Phone: (	)	
		t church:						
Shirt Size (circle o	one):							
S	M	L	XL	XXL		OTHER:		_
what ministries a	are you currei		ant Qı	uestionnai	re			
re you interested yes, please provid tc.) you wish to ser	e the area (ex.	. Acoustic guitar, e	lectric guit					

(Questionnaire continued)

Why d	you want to participate in this outreach? (Please use additional paper if needed.)
When	id you accept Christ as your personal Savior?
What v	ould you tell a person who wanted to receive Christ as Lord and Savior?
	oplications will be reviewed carefully and prayerfully as we select those who will attend "Reach Chicago." We are looking for people who are serious about being stretched.
	are 4 key verses we recommend you to memorize and know:
1.	John 3:16 "For God so loved the world that he gave his one and only Son, that whoever believes in him shall not perish but have eternal life."
2.	Romans 3:23
	"for all have sinned and fall short of the glory of God"
3.	Romans 6:23
	"For the wages of sin is death, but the gift of God is eternal life in Christ Jesus our Lord."
4.	1 John 1:9
	"If we confess our sins, he is faithful and just and will forgive us our sins and purify us from all unrighteousness."
	I have read all guidelines, and by signing this application, I am promising to adhere to ALL guidelines if chosen to attend.
	Signature: Date:

## **Reach Chicago Guidelines**

Please read and initial the following rules to show that you understand your responsibilities.
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	9	•
Team Effort	Our team will be working as a unit. Therefore, it is nece regarding punctuality, private and group devotions, tea personal prayer for other team members. Please compOFTEN.	m prayer meetings and services, and
	1 Thessalonians 5:11	(Initial)
Hours	Please obey all lights-out times, as well as wake-up tine enable the entire team to reach each destination on tine evening. Please be involved in personal and group development.	ne and to allow you enough rest each
	Philippians 2:4, Matthew 25:23	(Initial)
Language	Please no sarcasm, cutting remarks, bad language, an	nd complaining.
	Philippians 2:14	(Initial)
Dating	Avoid starting a relationship with someone during this to who will be going to Chicago, we expect you to follow to public displays of affection (holding hands, prolonged hands).	the same guidelines. There will be no
		(Initial)
Culture	Please understand that even though you will be in the you respect the customs and traditions of those to who respectful manner at all times. Always travel in groups	m you minister. Conduct yourself in a
	Matthew 5:14-16	(Initial)
Clothing	Clothing MUST be modest. Please read the section on then initial here.	proper dress and clothing on page 5,
		(Initial)
Authority	You must listen to and respect ALL authority. Please the avoid inquiring "Why?" and "How come?" You must be and help out in any way possible. Please offer assistant	a servant on this trip. Be willing to serve
	Hebrews 13:7 & 17	(Initial)
Vans	Please keep the vans clean at all times. Do not throw y trash in the van garbage bag or throw it in a trash can a	

(Initial) \_\_\_\_\_

### Parental Consent, Certification and Medical Authorization for Dependent Children

Parents or legal guardians of dependent children are required to complete this form. The information requested is designed to assist Reach the Heart in providing the safety of participants during this trip. This form is not valid if completed by the dependent child.

This form must be completed by the parent or legal guardian of the dependent child listed below.

Gene	eral Information (All information	tion must be filled out co	ompletely)	
epen	dent's Name:(First)	(Middle Initial)	(Last)	DOB:
				(State)(Zip)
epen	dent's Father's Name: (First)		(Last)	
ather <sup>:</sup>	's <b>Phone #</b> : (Home) () _	<del>-</del>	and/or (Cell) (	
ather	's Email Address:			
lother	's Phone #: (Home) ()		and/or (Cell) (	
lother	's Email Address:			
referr	red Emergency Contact Name: (Fi	rst)	(Last)	
merg	ency Contact Phone #: (Home) (		and/or (Ce	·II) (
amily	Doctor:	Dr.'s Pho	ne #: ()	<del>-</del>
Insu	rance Company Covering D	ependent Child	☐ Please m have inst	ark here if the applicant does no urance
ısuraı	nce Provider Name:		Polic	cy #:
1.	(All information	n must be filled out comple ed for an injury or sickness o		
••	If yes, explain and list any/all med			
2.	Is your child allergic to any type of If yes, explain and list any/all med			
3.	Does your child medically require If yes, explain and list any/all med	•		
4.	Does your child have any allergies If yes, explain and list any/all med	•	s, etc.)? Yes No	
	Dana a sana a bilah basa /aa baa assa	had) any of the following: (c		
5.	Seizures Asthma Heart Mul Explain:	rmur Diabetes Hay Fe		
5. 6.	Seizures Asthma Heart Mu	rmur Diabetes Hay Fe		

### **Consent, Certification and Assumption of Risk**

I, the undersigned, being the parent or legal guardian of the dependent child named above, do hereby consent to the dependent child's participation on Reach the Heart's 2024 Reach Chicago trip, including, but not limited to, all the activities customarily associated with this trip. I am aware of the hazards and risks associated with such a trip including, but not limited to, death or injury by accident, disease, terrorist acts, weather conditions, inadequate medical services and supplies, criminal activity, and random acts of violence.

Further, I certify that the dependent child is physically fit and adequately trained to participate in such a trip. I understand that while the above-named dependent child participates in these activities, he or she is responsible to comply with all orders and directives of the team leader and/or agent(s) in charge of the project.

I am aware of the hazards and risks to my dependent child and his or her property associated with serving in a missions capacity, such hazards and risks including, but not being limited to, death or injury by accident, disease, war, terrorist acts, weather conditions, inadequate medical services and supplies, criminal activity, and random acts of violence. I accept my child's assignment with full awareness of these risks, and I voluntarily assume all risk of death, injury, illness, and damage to my dependent child associated with such assignments, and any damage to his or her personal property. I further recognize that such risks have always been associated with missionary service.

(2 Corinthians 11:23-28)

I waive and release any and all claims for damages which I, or my heirs or successors, may have against Reach the Heart, the local church sponsoring this trip, or any agents, representatives, employees, volunteers, and contractors of this organization, arising from my dependent child's death, injury or illness, or any property damage/loss occurring during the term of his or her assignment or as a result of his or her assignment.

I do hereby assume all risk of death, illness, or injury that my child may suffer as a result of said assignment, from those causes described above.

I expressly waive any defense to the enforcement of any provisions of this commitment arising from a claim of lack of consideration, and warrant that this commitment constitutes a legal, valid, and binding obligation upon me, enforceable against me in accordance with its terms.

#### PICTURES/VIDEOS

I authorize Reach the Heart to use my child's likeness in photographs or video in any and all of its publications and other media. I will make no monetary or other claims against Reach the Heart for the use of such photos or videos.

#### **Medical Treatment Authorization**

I understand that I will be notified in the case of a medical emergency involving my dependent child. However, in the event that I cannot be reached, I authorize the calling of a doctor and the provision of necessary medical services in the event my dependent child is injured or becomes ill. I authorize the director or properly appointed staff to make emergency medical care decisions on behalf of my child if required by law or a health care provider. I agree to notify Reach the Heart in the event of any health changes that would restrict my dependent child's participation in this trip. I understand that the adult supervisors reserve the right to restrict my dependent child from any activity that they do not feel is within the physical capabilities of my dependent child.

I expressly agree that this assumption of risk and indemnity agreement is intended to be as broad and inclusive as permitted by law. I further state that I HAVE CAREFULLY READ THE FOREGOING ASSUMPTION OF RISK AND UNDERSTAND ITS CONTENTS, AND I VOLUNTARILY SIGN THIS RELEASE FOR MY CHILD AS MY OWN FREE ACT.

Signature of Parent/Guardian			Date
Signature of Parent/Guardian			Date
_		DER THE AGE OF 18 OR UNI DLESS IF YOU ARE 18 YEA	DER YOUR PARENT(S)/GUARDIAN(S) HEALTH INSURANCE RS OR OLDER.
FOR NOTARY USE:			
State of	ss•	County of	
		day of	, 202, before me personally appeared ecuted and acknowledged the foregoing instrument.
		(NOTARIAL SEAL)	
Notary Public			
My Commission Expiration		-	

### **Pastor's Recommendation Form**

The referring pastor <u>MUST BE</u> unrelated to the applicant and must have known the applicant for a period of time. Please return this form directly to the applicant in a <u>SEALED AND SIGNED</u> envelope so that they may submit all components together in one packet or you may mail to: Reach the Heart, Attn: Reach Chicago, PO Box 10265, Fargo, ND 58106. If you have any questions, email <u>reachtheheartoffice@gmail.com</u>.

Pastor Name:	Ch	nurch Name:				
Staff Position:	Churc	Church Phone:				
Church Address: (Street)	(City)		(Sta	ate)	(Zip)	
Contact Phone:	Ema	ail:				
Applicant's Name:						
How long have you known the ap	pplicant and how well do y	ou know hir	n/her?			
Do you have any concerns with	this individual working w	ith children/r	minors or kn	now any rea	son why this perso	
should not be approved to work	with children/minors?	YES NO	)			
If yes, please explain or p	rovide contact information	n and we wi	II contact yo	ou for a priv	ate conversation:	
Please assess the applicant in th	e following areas:					
	Uncertain	Needs Work	Fair	Good	Outstanding	
Devotion to Jesus Christ	٠		٠		٥	
Ability to Work With Others					٥	
Teachability					٥	
<b>Emotional Stability</b>		ū			٥	
Physical Health					٥	
Do you recommend this applican	t for Reach the Heart: Re	ach Chicago	<b>2024?</b> (Circ	le one of the	e following)	
Highly Recommend Recomm	Recommend Recommend with reservations*		ns* Do i	5* Do not recommend*		
*Please explain:						
		· · · · · · · · · · · · · · · · · · ·				
Additional comments:						

**Pastor's Signature** 

Date (MM/DD/YY)