

SANTA MARIA

Grades 1-5

When:

October 21, 2017, Saturday

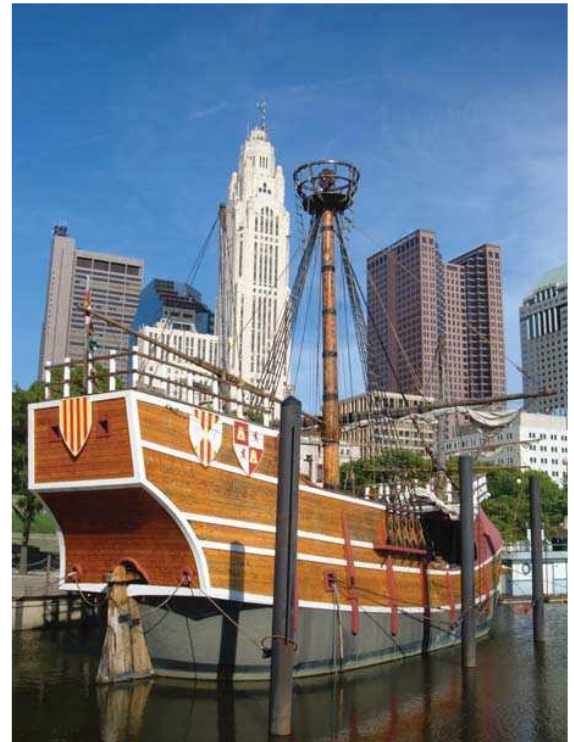
Where:

Jubilee Museum,
57 S. Grubb St.
Columbus, Ohio 43215

What:

An attractive, commemorative Santa Maria Patch is presented by the Catholic Committee on Scouting, Diocese of Columbus. It is a collector's souvenir reminder of the unique, fun, and history-learning activity, that will provide a boatload of memories. The activity was inspired by the 1992 celebration of the 500th anniversary of Christopher Columbus' discovery of America. Columbus and his crew brought the Catholic faith to the western world.

The theme of the Santa Maria Activity is "Discovery". Participants will learn about Columbus and the impact of his faith on his accomplishments.



Santa Maria

Time: 21 October, 2017

Starts at 3:00 p.m.;

Concludes at Approximately 6:00 p.m. in
the Museum's K.C. Room

Registration Fee:

\$10.00/person by Oct. 1, 2017,

\$15.00/person after Oct. 1, 2017,

(Registration Fee includes all activity
fees, materials and Souvenir Patch.)



~ WHO MAY PARTICIPATE: ~

This activity is available to any youth, male or female, who are in Grades 1-5, and any adult. At 6:00 p.m., Saturday, a Ceremony-At-Sea Closing Ceremony is re-enacted with the replica of the Santa Maria Ship in the Museum's K.C. Room. All youth and adult participants are presented with a commemorative Santa Maria Patch. All participants will leave by way of the gang-plank to the Museum parking lot and depart for home, using their own prearranged transportation plans.

Act Now!

Register Today!!!



Santa Maria

Grades 1-5



Activity Registration Form

Early Bird fee by Oct. 1, 2017 is \$10/person. Regular registration fee after Oct. 1, 2017 is \$15/person

Mail to: Catholic Committee on Scouting, P.O. Box 2222, Westerville, OH 43086 or catholicscouting015@gmail.com

Name _____ Home Phone _____ Cell Phone _____

E-Mail _____

Home Address _____

Male [] Female [] Youth DOB _____ Grade _____ or, Check here for Adult (18+) []

Church/Parish _____

Scouts: Unit Number _____ Rank _____ Leadership Position _____
(If applicable)

Please advise of any dietary restrictions, allergies or related conditions. We will make every attempt to accommodate your needs. _____

Each group is responsible for its own Health/Medical Forms + Tour Permits. These forms must accompany a group leader during the activity, or turn them in at Registration Table, upon arrival at the Activity.

RELEASE AND INDEMNIFICATION AGREEMENT

As the above-named participant, I hereby register for and commit to attend this activity/program. As a parent or guardian of the above-named participant, I give my permission for my child or ward to register for this activity. The undersigned parent/guardian releases and holds harmless the Diocese of Columbus and the diocesan Catholic Committee on Scouting, as well as any employee, agent, or representative thereof, from any and all liability, actions, causes of actions, claims, judgments, costs, or expenses arising out of, or in any way related to, injury, illness, or loss incurred by the participant while participating in or traveling to or from this activity.

CODE OF BEHAVIOR

Participants must stay and participate in the entire event. Participants may not leave the premises unless accompanied by an adult leader, parent, or legal guardian. The possession or use of alcohol, tobacco, drugs, or weapons of any kind, or foul language is not allowed. Participants must heed all directions of activity staff. Participants must respect the rights and property of others. Damage to or defacing of any property will be the financial responsibility of the participants involved and the participant's parents/legal guardians.

PHOTO RELEASE

I hereby assign and grant to the Diocese of Columbus Catholic Committee on Scouting (DCCS) the right and permission to use and publish the photographs, film, videotapes, electronic representations and/or sound recordings made of me or my child by DCCS, and I hereby release the DCCS from any and all liability from such use and publication. I hereby authorize the reproduction, exhibit, broadcast, electronic storage, and/or distribution of said photographs, film, videotapes, electronic representations and/or sound recordings without limitation at the discretion of the DCCS, and I specifically waive any right to any compensation I may have for any of the foregoing. (Note that the DCCS will use discretion in the use of the materials and will rarely associate real names with photos.)

I have read and understand all that is contained in this agreement.. I understand that failure to abide by these requirements may result in a request to my parents/legal guardians to transport me from the premises.

Participant's signature

Date

Parent/guardian signature

Parent/guardian name (printed)

Date