

# METNY Kadima Shabbaton

## December 11-12, 2009

Beginning 2:30 PM on Friday and Concluding 10:30 PM on Saturday Night

### Shelter Rock Jewish Center

## APPLICATION

Shelter Rock Jewish Center, 272 Shelter Rock Rd., Roslyn, NY 11576  
METNY USCJ – 212-533-0800 • 212-533-0400 (fax) • [metnvusv@uscj.org](mailto:metnvusv@uscj.org)

### Instructions

- **COST:** The Total Cost of the weekend is **\$60.00**. If bussing is needed, please add an extra \$20.00 for a total of \$80.00. Please make checks payable to “**USCJ – METNY**” and mail applications with checks to: **METNY USY 330 West 38<sup>th</sup> Street Suite 205 New York NY 10018 -Kadima Shabbaton. PLEASE PAY BY CHECK ONLY.**
- **DEADLINE:** Applications must be *postmarked* by **November 20, 2009. NO REFUNDS CAN BE GIVEN FOR CANCELLATIONS AFTER NOVEMBER 20<sup>th</sup>.**

### **BASIC INFORMATION:**

Name: \_\_\_\_\_ Email address: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Grade: \_\_\_\_\_  
Chapter: \_\_\_\_\_ Gender: \_\_\_ M \_\_\_ F Are you a vegetarian? \_\_\_ Y \_\_\_ N  
Division \_\_\_\_\_ How many Kadima Events have you been to? \_\_\_\_\_  
Will you need a bus? \_\_\_ Y \_\_\_ N

### **RITUAL INFORMATION:**

#### **I would like to LEAD (please check all that apply):**

Weekday Shacharit _____	Weekday Mincha _____	Kabbalat Shabbat _____	Musaf _____
Shabbat Shacharit _____	Shabbat Mincha _____	Torah Service _____	Maariv _____
Torah Reading _____	Haftorah Reading _____	Shabbat Maariv _____	Motzi/Birkat _____

Are you able to read Torah for the Shabbaton? \_\_\_ Y \_\_\_ N

What school do you go to? \_\_\_\_\_

### **HOUSING REQUEST:**

I need to be within walking distance of the shul \_\_\_ Y \_\_\_ N Please list any pet allergies (be specific) \_\_\_\_\_

*All participants must bring a sleeping bag!*

# APPLICATION METNY KADIMA SHABBATON, 2009

Please list up to three other Kadimaniks with whom you would like to be housed with.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

## PARENT/GUARDIAN:

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

Parent/Guardian Email: \_\_\_\_\_

## IN CASE OF EMERGENCY (AND PARENT/S CANNOT BE REACHED) CONTACT:

Name: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell/Business Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell/Business Phone: \_\_\_\_\_

## MEDICAL INFORMATION:


Name of Insurance Carrier: \_\_\_\_\_

Policy Holder's Name: \_\_\_\_\_ Policy #: \_\_\_\_\_

Please list any dietary issues or allergies: \_\_\_\_\_

Please indicate any medical conditions we should be aware of: \_\_\_\_\_

We the undersigned parents/guardians of \_\_\_\_\_ authorize the Director of Youth Activities of METNY KADIMA or his/her agent, or of the United Synagogue of Conservative Judaism to act as our agents to consent to any medical diagnosis and/or treatment or hospital care deemed necessary. In no event will METNY KADIMA or staff or agents associated thereof, or the United Synagogue of Conservative Judaism, or staff or agents associated thereof be held liable for any first aid or surgical procedures performed pursuant to this consent.

Parent/Guardian Signature:  \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name (please print): \_\_\_\_\_

## ACCEPTANCE NOTIFICATION

Once your application has been accepted, you will receive pre-Shabbaton information including suggested packing list, directions to the synagogue, and all other details pertaining to the weekend.

**Note on Signatures:** A Parent/Guardian signature is required above. The next and final page of this application requires both the Kadimanik and Parent/Guardian signature on the METNY Code of Conduct, and a Rabbi or Youth Director Signature. Applications that do not have all of these signatures will not be accepted.

# APPLICATION METNY KADIMA SHABBATON, 2009

## CODE OF CONDUCT

1. Kashrut will be observed, including during transportation to and from KADIMA events and during free time.
2. All participants shall observe the religious policies established by the USCJ, including those pertaining to Shabbat observance (including arrival prior to Shabbat and travel on Shabbat exclusively to a scheduled synagogue event or services); all males must wear Kippot during services and Tallis/Tefillin in morning services where appropriate. **All Kadimaniks shall wear clothing appropriate to the event/location.**
3. Possession or use of any weapons, alcohol, tobacco products, and/or illegal drugs is not permitted at a KADIMA event.
4. Attendance at all scheduled KADIMA event activities is required, and only those registered for the KADIMA event are permitted to attend, unless otherwise approved by the event director. No Kadimanik may leave the premises in which a scheduled event is located without prior approval of the event director as well as prior permission of the parent/guardian.
5. **All housing assignments are final** and any changes may only be made with the express permission of the event director. Prior to scheduled events, participants must proceed directly to the place for the event, and following the event, must proceed directly to the assigned house.
6. House parties are not permitted and once at the house to which you have been assigned, you may not leave until it is time to return to the program.
7. No participant shall violate any civil or criminal law, including but not limited to, those relating to tampering of or destruction of one's own or another person's physical and/or mental integrity. Inappropriate or unwelcome physical contact or language, indecent attire or public nudity, is not permitted.
8. Clothing on which any profanity or inappropriate language, pictures, or symbols are written, printed, or depicted is not permitted. No visible underwear is permitted for both males and females. During services, inappropriate short skirts or shorts, or tight garments are not permitted. Shoulders must be covered for both males and females. Tank tops, 2-piece bathing suits (except where midriff is covered), bare midriff styles, halter-tops, leggings or see through blouses are not permitted. **Required attire for Shabbat:** Males—long pants with a dress shirt and dress shoes. Females—a skirt or dress at a minimum fingertip length, blouses with sleeves, dress shoes. Males and Females—no shorts, jeans, or sneakers are to be worn during Shabbat services and meals.
9. Participants shall fully cooperate with every staff person, including volunteer staff, and shall otherwise adhere to all rules established for the event.

Anyone who violates this Code shall be subject to disciplinary consequences, including, but not limited to, being sent home at the expense of the violating Kadimanik or staff member (or his/her parent/guardian), monetary payment for personal and/or property damages and suspension from future KADIMA events. The event director reserves the right to enforce these and any other behavioral rules, and impose additional sanctions with respect to behavior that would otherwise affect the integrity of the KADIMA event and/or health and welfare of its participants and staff.

In the event a participant violates the National Youth Commission regarding drug/alcohol abuse or any other criminal offense (including but not limited to shoplifting), punishment for that offense will include suspension from Regional Kadima events/activities (including but not limited to Shabbaton or Encampment) for one year following the infraction. The METNY Region reserves the right to impose additional sanctions in connection with this or any other improper behavior as it sees fit.

METNY Region reserves the right to search the room and belongings of any attendee of any KADIMA event or activity if it has reasonable grounds to believe that such a search is necessary to secure the health, safety, and/or welfare of the program and/or its participants. Judgments in such situations will be made by the event director in consultation with the Regional Youth Director. METNY reserves the right to enforce other rules relating to the integrity of its programs and/or health, safety, or welfare of its participants.

\_\_\_\_\_  
Kadimaniks Signature

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Youth Director's Signature