"In everything set them an example by doing what is good. In your teaching show integrity, seriousness and soundness of speech that cannot be condemned, so that those who oppose you may be ashamed because they have nothing bad to say about us."

Titus 2:7-8

PARTICIPATION RULES

Thank you for your interest in the Europe 2020 Missionary Tour of the LAUDA DOMINI Youth Choirs! We are very excited for this amazing opportunity to serve the Lord through music, by sharing the Gospel and encouraging Romanian churches in Western Europe, together with young people from Romanian churches in the United States. Over three weeks, we will visit about 4 countries and have an opportunity to share the Gospel of Jesus Christ with hundreds, if not thousands of people. As you can imagine this tour is not easy to organize and lead, so we need rules and we must enforce the rules. We are not doing this because we are mean, but because we want to have a successful and efficient trip, without any delays, problems, accidents, or drama, and while we rely heavily on prayer and the presence of the Holy Spirit, we must also be diligent in preparing and making sure everything goes well. That's why we ask you to please read carefully all the rules included in this package, fill out all the forms, initial and sign where necessary. If something does not make sense, or if you need some clarification on something, please do not hesitate to ask at any time before you sign the forms. Your signature on these forms means that you have read and completely understood and fully agree with all the rules and the regulations. You can ask questions at email: contact@laudadomini.org. All underage applicants (under 18 years old) must read the rules together with their parents, and the parents must also sign the forms indicating that they agree and take full responsibility for the actions of their minor children.

Here are some ground rules:

- 1. Fill out an application and pay a nonrefundable deposit of \$200. The deposit will not be refunded under any circumstance.
- 2. All the unexpected expenses are the responsibility of the participant and must be paid by him/her.
- 3. All the payments must be made according to the posted payment schedule.
- 4. The cost of the passport, any necessary visas and/or required vaccinations are not included in the cost of the tour. The passport must be valid at least until December 31, 2020.
- 5. Each participant assumes their responsibility and liability for all the decisions made concerning the health issues that might appear during the tour.
- 6. This trip can be very fulfilling but will also be very tiring, both physically and emotionally. Please consider all the personal factors that will prevent you from fully dedicating yourself to this mission in unusual traveling conditions.
- 7. Each participant should have a group of brothers and sisters praying for him/her during the tour.
- 8. Each participant is responsible for all the expenses related to the trip. The funds deposited for the trip are considered contributions and the IRS does not allow refunds of contributions.
- 9 Each participant must learn very well all the songs included in the repertoire for this tour, attending both the local rehearsals and the general ones according to the program that will be posted.
- 10 The hotel room assignments will be made separately for guys and for girls, and for a better organization, the assignments will also be made by the area where the participant is from by the coordinator of that group and no preference will be accepted for hotel room assignments with a person from a different area or choir.

these conditions, I will not be able	tely all the above conditions. I have to participate in this tour. I also u costs which include, without being l	nderstand that if I withdraw,	I will be
Printed name	Signature	Date	

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APPLICATION FOR PARTICIPATION

Personal Information:

Last Name	First Name	
Full Name as Printed in	the Passport	
Address	City	StateZip Code
Phone		
E-mail	Fax	
Date of Birth	Sex: M. F. M	MarriedSingle
Member of the following	g Romanian Church	; Since
Please provide three ref	Gerences: (Pastor/Youth Pastor/Teac	cher/Friend – Pastor is mandatory)
1.Name	Relationship:	Phone
2.Name	Relationship:	Phone
3.Name	Relationship:	Phone
Confidential Information	on for Medical Emergencies:	
Full Name	Blood ty	/pe
	primary care physician:	•
Physician's Name		
Address	City	StateZip code
Phone (office)	Home	
Information about the n	nedication you are currently takin	<u>g:</u>
List all the medications,	including their generic names:	
List all the medical issue	es you needed care for in the last 12	2 months:
Most recent date of the TList all the allergies (inc	Tetanus vaccinationluding food):	
Please list all the medicathe tour:	al conditions that a physician should	d be aware of in care of an emergency

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PARENTAL CONSENT

(to be filled out by parents of minor participants)

We (I), the undersigned, parent(s) o permission for our (my) son/daught			, do hereby give ties with _LAUDA DOMINI Youth Choirs
	, and for this purpose	to travel from the	he USA to Europe, between June 19, 2020
and July 6, 2020.	e e e	1. 1 .	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			l, or dental diagnosis and/or treatment, and
			appervision and on the advice of any licensed
			gency care facility, whether such diagnosis or We (I) do herewith authorize the treatment by
this authority.	i the said physician or	at said nospital.	we (1) do herewith authorize the treatment by
	liable and agree to n	nav all casts and	expenses incurred in connection with such
			is authorization. Should it be necessary for
our (my) child to return home due costs. My signature also serves to service rendered for the named par Insurance Company, named below, hereby release from any and all liab We (I), the undersigned, do hereby tour, EUROPE 2020 and their partiabilities or claims for personal in	e to medical reasons indicate my willingne rticipant. Our (my) sign to be billed for any arility the organizers of release and agree to hoastors, leaders, directonjury, illness, or deat by our (my) child that	or otherwise, the ss to take full fin gnature also serve also like the EUROPE 202 old harmless the Lors, employees, at th, as well as prat occur within the	undersigned shall assume all transportation ancial responsibility for any and all medical es to indicate my willingness for my Health s and services should they be needed. We (I)
Child's Full Name			
Child's Date of Birth/	/		
Full name of Parent 1/ Guardian:	·	Signature of Pa	rent 1/Guardian
Full name of Parent 2/Guardian:		Signature of Par	rent 2/Guardian
Date of signature:			
Emergency Contact			
In case of emergency contact:			
Name	Relationship		
			_
Address	City	State	Zip
E-mail	Phone	Work phone	e
Information about Health Insuran	<u>ce</u>		
			in the countries where we will travel. If you nee for the duration of the trip outside the
Do you have health insurance Yes	No_ If yes, does it cov	ver you internation	nally? Yes No_
Health insurance number			
Insurance Verification			
I hereby certify that my health insur	ance company (name	of health insuranc	e company)
Account no will o	cover (type of coverag	re)	during my trip to the following

Approval date

Between the dates of

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EMERGENCY CONSENT FORM

To Whom it May Concern:

I, the undersigned, in case it is necessary for a medical emergency and I am not capable of making such a decision on my own, hereby consent to x-ray examinations, anesthetic, medical, surgical, or dental diagnosis and/or treatment, and hospital care, to be rendered to me under the general or specific supervision and on the advice of any licensed physician or dentist or the medical staff of a licensed hospital and/or emergency care facility, whether such diagnosis or treatment is rendered at the office of the said physician or at said hospital. We (I) do herewith authorize the treatment by this authority.

Printed name	Signatur	e	Date	
Emergency Contact				
In case of emergency con	itact:			
Name	Relationship			
Address	City	State	Zip	
E-mail	Phone	Work phoi	ne	
Information about Healt	th Insurance			
	h insurance company and verify to pered, it is your responsibility to perited States.			
Do you have health insur	ance_Yes_No_If yes, does it co	over you internat	ionally?_Yes_No_	
Health insurance number	- 	_		
Insurance Verification				
I hereby certify that my h	ealth insurance company (name	of health insuran	ce company)	
Account no	will cover (type of coverag	e)	_ during my trip to the	e following
Between the dates of	Approval date	e		
Printed name	Signatur	e	Date	

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INFORMATION AND RELEASE OF LIABILITY

I, the undersigned,	, participant at the LAUDA DOMINI Youth Choir
Missionary Tour, EUROPE 2020, do hereby releas	se and agree to hold harmless the LAUDA DOMINI
	nd their pastors, leaders, directors, employees, agents, or
	for personal injury, illness, or death, as well as property
	h may be incurred by me that occur within the effective
	n the above named tour and its activities, whether these
· · · · · · · · · · · · · · · · · · ·	ders, directors, employees, agents, or representatives or
not.	
I, the undersigned, hereby declare that I an	m physically able to participate in the tour activities and
this is confirmed by a medical certificate obtained in the	he last 6 months.
I she was demains all the same see all as all	11 4h - miles ef 4h - 4 - m - mil 4e - ch - m - 11 4h - im-4m - eti - m - e
the leaders of this tour.	ll the rules of the tour and to obey all the instructions of
the leaders of this tour.	
	ent for my image and voice to be used in any photos,
	rialize the tour and for the publication of these materials
	book or any other means. I also hereby wave any rights
to compensation or control for the above.	
	onsibility for any supplementary transportation costs if I
have to return home for any reason before the official	return date.
	onsibility for any supplementary costs for transportation
	up trip rules, tardiness, or lack of participation for any of
the tour activities which will lead to my expulsion from	m the group.
Printed name Sign	atureDate

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GROUP TRIP RULES

This tour is meant to be an enjoyable trip during which people are able to grow spiritually, share the gospel of Jesus and have fun in the same time. In order to best do that, we need to have a common understanding of a basic set of rules. Observance of these rules is absolutely mandatory and required to help maintain the integrity of the group.

Please **read carefully** and <u>initial</u> next to each rule, to acknowledge your <u>understanding</u> and <u>acceptance</u> of these rules. Please also sign on the bottom of the page. If you are under 18 years old, your parent/guardian must also read, and sign on the bottom of the page. Your signature and that of your parent/guardian shows that you have read, understood and agree to abide by these rules.

must also read, and sign on the bottom of the page. Your signature and that of your parent/guardian shows
that you have read, understood and agree to abide by these rules.
1. Attitude: The participants will always display a Christlike attitude toward the other participants and
toward anybody else we come in contact with. That means we do not argue, fight, use foul language in
any circumstance.
2. Leadership: Regardless of your age, you accept to obey the leaders and accept their authority in any
circumstance during the tour. You will conform to the leaders' decisions at all times, especially during the
public performances of the group.
3. Leaving the premises: No one, regardless of age, leaves the group while on the road, or while at the
hotel. Do not ever leave to visit a place that is not on the tour schedule, whether on your own, or with
another group. Extraordinary circumstances require permission from the group leadership.
another group. Extraordinary circumstances require permission from the group leadership.
4. Condon segmention. The hadrones and bethnoones will be clearly marked by condon There will be
4. Gender segregation: The bedrooms and bathrooms will be clearly marked by gender. There will be
no guys in girls' bedrooms/bathrooms and no girls in guys' bedrooms/bathrooms at any time and for any
reason, even if they are related.
5. Courtesy: We will be courteous to the other residents in hotels and will keep the noise to a minimum.
6. Respect: We will take care of the hotel rooms and busses as they were our own, and we will try to
leave them in a better state than we found them.
7. Serving: We will all participate in the scheduled activities.
8. Luggage: Pack lightly – do not bring more stuff than necessary for your personal needs. Never leave
your luggage unattended
9. Common sense: There will be no alcohol, tobacco, illegal drugs or any type of weapon in the
possession of any participant at any time. Failure to obey this rule leads to immediate expulsion from the
tour (you will be asked to leave, or your parents will be called to pick you up)
10. Be on time, every time: You must be on time, every time, at all the scheduled meetings, meals, and
any other activities. You must understand that your delay might cause serious disruptions to the entire
group. Any repeated delays will be penalized (\$5/5 minutes)
11. Documents and money: Always carry all your travel documents (passport and plane tickets) and
money with you in a belly pocket belt. Never exchange currency on the street or on your own.
12. Consequences : If any of the above rules are violated, the participant guilty of the violation will be
penalized financially and/or by being expelled from the tour. If you are expelled, form that moment on
you are not part of our group anymore and you will be solely responsible for your return trip home.
Parents of participants under 18 years old will be telephoned to come pick up
their child(ren).
I have read carefully, I have understood and I agree to abide by the above rules,
Print Name:
Carrier Company
Parent Signature (if under 18):
Parent's Telephone number:
Data.
Date: