



Iowa District West Senior Youth Gathering CAMP OKOBOJI—Milford, IA October 5-6, 2024

This year's gathering will be **different** – different month, different location, different schedule, and different cost, but the **same GREAT QUALITY event!**

Welcome to “**One In Christ**” the 2024 Iowa District West Senior Youth Gathering. All high school youth and their adult leaders are invited to attend the IDW Youth Gathering this October 5-6,

2024, where we will focus together on Galatians 3:28. The event will include music, Bible study, hands-on activities, servant project, camp activities, and worship. Our presenter is Pastor Paul Dare from Spirit Lake, Iowa.

Cost will vary for each group once you decide for 1 or 2 nights lodging. One night (Sat) lodging is \$85 per person; or two nights (Fri & Sat) lodging is \$115.00 per person for registration. **The full payment and paperwork must be received by September 5.** Cost includes lodging, meals on Saturday and Sunday, T-shirt, and total program. **Your registration will not be processed if payment is not received by the deadline*

ALL REGISTRATION WILL BE DONE ONLINE!!!

Registration will be done similar to that of a National Youth Gathering. **Kindly gather all of your groups information using the information provided in your packet and plan to enter your groups information all at once.**

When ready, you may access the online registration using the QR code (take your cell phone and open the camera app and hold it up to the square to the right, it will take you to the District website which has the link to register) **OR** go directly to <https://www.surveymonkey.com/r/SYG2024> to begin registering.



The IDW Youth Gathering will start Saturday, October 5, with registration from 7:30am -9:15 am. Gathering activities will begin at 9:30 a.m. A tentative schedule is enclosed.

Your registration packet includes the following items for you to copy and distribute as needed:

1. Registration Information & Instructions
2. Youth Registration Form with Health Form on back (use this to enter online registration and then keep for your records at the gathering)
3. IDW Senior Youth Gathering Covenant (keep for your records at the gathering)
4. Tentative Schedule of Events (copy as needed)
5. Financial Aid Form (copy if needed)

We look forward to a fabulous Gathering event. If you have any questions regarding online registration, please contact our volunteer registrar, Angie Spann, at 515-556-6508 or Angie@sotv-wdm.org.

Registration Information and Instructions

Who may attend the Youth Gathering?

- Any 9th - 12th grade member of the LCMS
- Guests are welcome to attend if they are registered with your church group
- Adult Leaders

What are the Adult Leader Requirements?

The IDW Youth Gathering requires that congregations send *at least* 1 adult for every 6 youth. Adult leaders must be 21 years of age or older, approved by your pastor, active in church, spiritually mature, and willing to be involved with youth. Congregations also choose one of their leaders as their Primary Adult Leader. Gathering confirmation and all other information will be sent to the information provided for the Primary Adult Leader.

IDW strongly encourages each congregation to have a background check on all adult counselors. (The Synod recommends Protect My Ministry. For information go to www.protectmyministry.com/lcms.) If you have additional questions, contact Rhonda Mohr at the District office.

What is the Cost?

Total Cost: One Night lodging plus 3 meals & all activities = \$85 per person; Two Nights Lodging plus 4 meals & all activities = \$115.00 per person (Due by September 5). There will be no exceptions to these fees and deadlines. All congregations must complete their online registrations by September 5 and they will not be processed unless payment is received at the District Office.

Cost includes meals and lodging at Camp Okoboji in Milford, IA, activities, a T-shirt, and the total program.

Refunds: The District counts on those registered to keep our commitments as t-shirt, food and rooms must be secured in advance. We strongly encourage finding a replacement for someone previously registered to attend. Refunds are only granted in certain instances and within a certain time frame. We will grant a refund if we receive it by September 13. If the cancelation is after t-shirts have already been ordered a refund minus \$10 for the shirt will be granted.

Additional Items to Bring: Please have each participant and adult bring a Bible, bedding or sleeping bag for a twin size mattress, personal toiletries, towels, work gloves and rake for the servant project, closed-toe shoes, bug spray, snacks, and money for any items from the camp store.

Forms: Pastors or youth leaders may complete the bottom portion of the Youth forms to provide instructions on registration and payment for your congregation's needs.

Pro tip: Choose a registration deadline for your participants to turn in their forms that is **earlier** than the actual deadline. Put this earlier date on the registration forms and on all your publicity materials. This will give you plenty of time to have a church check written and finalize other details before the Gathering's actual online registration deadline. **(September 5)**

Registration is open now!

After completing your groups ONLINE registration, please send:

___ A payment of \$85 or \$115 per person (depending on if you arrive Fri evening or Sat) with **one** church check payable to Iowa District West - SYG

To: Roger Curtis
Iowa District West
409 Kenyon Road Suite B, Fort Dodge, IA 50501

Adult or Youth Registration Form

(copy on *white* paper)

Iowa District West Senior Youth Gathering

October 5-6, 2024

Camp Okoboji, Milford, IA

Name: _____ M _____ F _____
Last First Middle Initial

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ Date of Birth: ____/____/____ Grade Level _____

Home Congregation & City: _____

T-Shirt Size (adult sizes): ___S ___M ___L ___XL ___2XL ___3XL ___4XL ___5XL

Special health concerns? Yes / No Please Explain: _____

Approved for Communion by Pastor of Congregation: Yes or No

Adult or Youth Commitment

I agree to participate and cooperate in every way at the IDW Senior Youth Gathering.

Signature of Adult Chaperone or Youth

Parental Consent

I give my permission for my son/daughter to participate in the IDW Youth Gathering and I have completed and signed the Health Form included in this registration.

I understand that photographs and/or video/audio recordings made during this Youth Gathering may include my child, and I authorize use of such photographs or recordings at the discretion of the IDW Youth Gathering Committee and/or Iowa District West.

Signature of parent/guardian

I have reviewed this form and the Gathering Covenant and certify that they are complete.

(This portion is to be completed by your pastor or youth leader prior to distribution)

Please give your forms to _____ by _____
(Pastor, DCE, or Youth Leader) (date)

with a payment of \$ _____ made payable to _____

Health Form—Youth

Participant's Name: _____ Date of Birth: ____/____/____

Parent(s) Name(s): _____

Primary Phone: (____) _____ Alternate Phone: (____) _____

Family member/friend who can be responsible for student if you cannot be reached:

Name: _____

Phone: (____) _____ Relationship: _____

Medications: _____ **Allergies:** _____

Special health conditions? ____ No ____ Yes Explain: _____

Insurance Provider Name: _____

Phone: (____) _____

Address: _____

Policy Holder's Name: _____

Policy Number: _____ Group Number: _____

Title XIX: _____

I verify that the above medical information on my child is complete and accurate and that I have legal custody of the participant named above. I grant my permission for adult leaders at the Gathering to administer general first aid treatment for any minor injuries or illnesses experienced by my child. In the event of an emergency, I hereby authorize the calling of an ambulance and/or physician at my expense to provide whatever emergency medical or surgical treatment is deemed necessary by a licensed physician.

I authorize release to the above insurance company any information needed to process a claim. I understand that I am financially responsible for all charges incurred.

Signature of parent: _____ Date: ____/____/____

IDW Senior Youth Gathering Covenant

In our baptism we are blessed with power from the Holy Spirit; power to resist temptation and live in response to God's love for us. At the IDW Senior Youth Gathering we strive to share Christ's Word with others as we live as the family of faith. This Gathering Covenant guides us to live in love while we celebrate and learn at this year's event.

1. I promise to participate in all Gathering activities as scheduled.
2. I will treat others with love, building each other up.
3. I will offer my respect to our leaders and to other youth. I will be respectful of the feelings of others.
4. I will give everyone and everything a fair chance, approaching each situation with a positive attitude.
5. I will put away my phone and electronic devices when my attention is expected elsewhere.
6. I will be helpful to other participants and to Gathering staff.
7. I will use our group leaders to help us resolve problems that may arise between other youth and me.
8. I will ensure other's privacy by not entering rooms when not invited. I agree that **NO COUPLES ARE TO BE ALONE IN ROOMS/CABINS AT ANY TIME** and I will obey that rule.
9. As a Christian citizen I will obey rules that are set by our group leader(s), the Gathering staff, and other governing authorities for my health and safety. Among those rules are:
 - a. No illegal drugs
 - b. No alcohol
 - c. No tobacco
10. I will be courteous to other camp guests at all times. I will be in my room with the lights out by the designated time each night.
11. I will treat the property of the camp with care. I understand that any damages may be billed to those responsible for the damage.
12. I agree that everyone who violates this covenant will be counseled and disciplined appropriately. A major violation may result in a youth being sent home with a parent.
13. I will remember that I have a great opportunity to be a Christian witness and reflect Christ's love in my words and actions.

In response to God's grace given in our Baptism, I promise to live by this covenant at the IDW Youth Gathering at Camp Okoboji in Milford.

Youth Signature

I support the IDW Youth Gathering Covenant and I have discussed it with my child. In case of a major disciplinary issue during the Gathering, I understand that I may be asked to come and take my child home. I can be reached at:

Primary phone number

Parent Signature

2024 - "ONE In Christ" Schedule

Friday, October 4

7:00-9:00pm Groups that chose to pay for two nights lodging may arrive and check-in

Saturday, October 5

7:30-9:15 Registration-check-in, unpack

9:30-10:45 GATHERING #1

10:45-12:15 Service Project (please see additional items to bring for this)

12:15-1:00 Lunch

1:00-2:00 GATHERING #2

2:00-3:45 Outdoor Camp Activities

3:45-4:15 Refreshments/Camp Store

4:15-5:15 GATHERING #3

5:30-6:30 DINNER

6:30-7:30 Ice Cream Social

7:30-9:30 Nightlife

9:30-10:00 Devotion at Outdoor Chapel

10:00 In Cabins

11:00 Lights Out

Sunday, October 6

8:00-8:45 Breakfast

9:00-10:30 Worship

10:30 Closing



This year's offering will be used to support those affected by the floods in north and western Iowa.

Application for Financial Assistance Iowa District West Youth Events

Important Information:

- * **This application is to be completed by the pastor or church professional of the youth attending.**
Use a separate application for each youth.
- * The applicant must be a member of an Iowa District West, LCMS, congregation.
- * In the space provided (#3), explain the reason this youth is in need of financial assistance and any special circumstances that pertain to that need. This section must be completed.
- * The policy of the Iowa District West Youth Services Committee is to award a maximum of 50% of the registration fee. Please apply only for the assistance genuinely needed.
- * Families and congregations are to have primary financial responsibility.
Please indicate the amount the congregation is able to contribute.
District assistance is intended to supplement the family's and local support.
- * Send the completed application by the event registration deadline to:

**Mail: Youth Department
Iowa District West, LCMS
409 Kenyon Road, Suite B
Fort Dodge, Iowa 50501**

Email: sue@iowadistrictwest.org

Applicant Information (please print or type)

Date of Application _____
Name of Youth _____
Parent(s)/Guardian _____
Home Congregation _____ Town _____

Financial Need (fill out completely)

- 1) Check the event the applicant will attend:
Cub Week ____ Jr. High Week ____ Youth Week ____
Jr. Youth Gathering ____ Sr. Youth Gathering ____
- 2) Cost of the event: \$_____
Amount the congregation is able to provide: \$_____
Amount of assistance requested: \$_____
- 3) Explanation of the need/special circumstances: _____

- 4) Signature of pastor/church professional: _____

* * * * * **District Use** * * * * *

Signature of District Executive: _____ Amount Awarded \$ _____