

STATE YMCA OF PENNSYLVANIA, INC.
PARTICIPANT CODE OF CONDUCT

All participants in the State YMCA of Pennsylvania's Youth & Government program should demonstrate the positive values of Caring, Honesty, Respect and Responsibility.

A signed copy of this code of conduct will be required from each participant as a part of the registration process.

THE CODE:

1. Delegates are expected to remain on site for all statewide functions unless the approval of his or her advisor AND the Director of the program are secured. The Delegate must be picked up and returned by a parent or legal guardian.
2. Delegates are expected to be respectful of the materials of officials in the State Government and shall not remove or tamper with them in any manner, either at desks in the Senate and House Chambers or any other room.
3. Food and beverages in the Senate and House Chambers, Committee or Caucus Rooms, Library, offices and Governor's Reception Room is strictly prohibited.
4. Tobacco products and the use of or possession of alcoholic beverages or non-prescription drugs will not be tolerated.
5. Any prescription medication or over the counter medications need to be known by the delegates advisor and the advisor should have a written note from parents or legal guardians expressing permission for the possession of said medication.
6. Possession or use of a firearm or any other instruments that could be used as a weapon is forbidden at any Y&G function.
7. The State YMCA is not responsible for any lost or damaged personal electronic equipment such as but not limited to cell phones, i-pods, laptops, cameras....etc. Bring at your own risk.
8. Male and female delegates may visit in each other's hotel rooms ONLY when accompanied by an advisor. All doors must remain open when delegates are in any room not assigned to them.
9. Students should not be alone with any advisor or alumni volunteer at any time.
10. Delegates are expected to strictly observe the established curfew when participating in overnight events. This means delegates must be in and remain in their assigned rooms with the doors closed until the curfew ends.
11. Members are not permitted to invite or receive outside visitors at program events without previous approval from the Director and their Advisors.
12. At overnight events, members are expected to lodge in their assigned rooms unless otherwise approved by their advisor and the Director is informed of the change.
13. Members are expected to wear their name badges at all times (including social activities) while attending Y&G events.
14. In the State Capitol, men are expected to wear a suit or sport coat with tie and trousers; women wear a dress, skirt and blouse, pants suit or dress pants with appropriate top. Skirts/Dresses must be business length (knee length) no shorter. Shorts, jeans, and revealing attire are inappropriate in the Capitol.
15. All program participants are expected to accept and demonstrate the positive character values of caring, honesty, respect, and responsibility.

(Student's Signature)

(Delegation)

(Date)

(Print Students Name)

(Advisors Name)

STATE YMCA OF PENNSYLVANIA, INC.
PARTICIPANT AUTHORIZATION FORM

I, _____, as the parent/legal guardian of _____,
(Parent/Legal Guardian's Name) (Student's Name)

who resides at _____,
(Address, City, Zip)

hereby authorize my son/daughter to participate in the State YMCA of Pennsylvania's Youth & Government Program. I understand that he/she will travel with his/her delegation to participate in all program events while under the supervision of his/her Youth & Government club advisor.

Should my son/daughter require medical attention, I hereby authorize the YMCA of Pennsylvania and/or his/her club advisor to secure qualified emergency medical care on the scene or at the nearest medical facility.

Please check here if you have special instructions regarding medical care/treatment or if your son/daughter has a pre-existing health concern that we should know about (this includes any prescription medication that must be taken while involved in the program). Please attach medical information to this form.

I also hereby authorize the State YMCA of Pennsylvania to utilize photographic or video images, in a variety of communication mediums, of my son/daughter. This includes but is not limited to www.ymcapa.org, Youtube.com, Facebook.com, individual YMCA websites, newspapers, TV news channels and independent TV stations for documentaries. Images may be used to promote and provide education about the Youth & Government program, for grant writing and other fund-raising activities, advertising, or for any other purpose consistent with the Mission of the State YMCA of Pennsylvania.

Furthermore, I have fully read and understand the attached Code of Conduct. Should my son/daughter be sent home for violation of the code I am to pay costs associated with the return travel. I understand that I will be notified if such action is required and given the opportunity to select the means of transportation.

Finally, in the case of emergency involving my son/daughter, please contact:

1. _____, _____, at _____.
(Name) (Relationship) (Phone Number)

2. _____, _____, at _____.
(Name) (Relationship) (Phone Number)

3. _____, _____, at _____.
(Name) (Relationship) (Phone Number)

Signed:

(Parent/Guardian Signature)

(Date)

(Parent/Guardian Signature)

(Date)