



Phong Trào Thiếu Nhi Thánh Thể Việt Nam Tại Hoa Kỳ
The Vietnamese Eucharistic Youth Movement in the USA

THƯ THÔNG BÁO SA MẠC PHAOLÔ II

Kính thưa quý phụ huynh,

Ngành Nghĩa Sĩ của các đoàn Thiếu Nhi Thánh Thể Têrêsa Hải Đồng Giêsu, Tôma Thiện, John Paul II, Kitô Vua Sacramento, và Các Thánh Tử Đạo Việt Nam kính xin quý phụ huynh cho phép con em quý vị, là các em Nghĩa Sĩ được tham dự Sa Mạc Phaolô II với chủ đề “**Come to the Feast – Hãy Về và Dự Tiệc.**” Mục đích của Sa Mạc Phaolô II là để các em học hỏi tinh thần Chinh Phục của người Nghĩa Sĩ theo gương Thánh Phaolô, và giúp xây dựng tình thân giữa các em Nghĩa Sĩ đoàn bạn.

Chúng con rất mong quý phụ huynh hết lòng khuyến khích và giúp đỡ bằng cách cho các em tham gia vào sinh hoạt trên và cầu nguyện cho Sa Mạc được đạt nhiều thành quả tốt. Sau đây là chi tiết của Sa Mạc.

- Địa Điểm:** Daybreak Camp
6676 Rose Acres Lane, Felton, CA 95018
- Thời Gian:** Từ 7:00pm thứ Sáu, ngày 23 tháng 8, năm 2019
Đến 3:00 pm Chúa Nhật, ngày 25 tháng 8, năm 2019
- Lệ Phí:** \$100 (ngân phiếu xin ghi **TNTT-TDV**, memo: **Sa Mạc Phaolô II**)
Late fee: \$10 additional (nếu nộp sau ngày 5 tháng 5, năm 2019)

Hạn chót nộp đơn và lệ phí là ngày 5 tháng 5, năm 2019. Chi phí sẽ không được hoàn trả lại sau ngày 5 tháng 5, năm 2019 nếu quý vị hủy bỏ.

Mọi thắc mắc, xin quý phụ huynh liên lạc trực tiếp với các trưởng phụ trách sau đây:

- | | | | |
|--------------------------------|------------------------|--|-------------------|
| Đoàn Tôma Thiện | Tr. Hồ Hoàng Hiếu | hieuhh@gmail.com | 408-605-5116 |
| Đoàn Têrêsa Hải Đồng | Tr. Phạm Đ. Minh-Trung | minhi000@gmail.com | 408-316-9358 |
| Đoàn John Paul II | Tr. Đại Nguyễn | Daiquinguyen@gmail.com | +1 (714) 478-0915 |
| Đoàn Kitô Vua Sacramento | Tr. Khoa Đỗ | kitanational@gmail.com | (916) 842-9412 |
| Đoàn Các Thánh Tử Đạo Việt Nam | Tr. Toàn Vũ | quest4ttv@yahoo.com | (408) 205-5666 |

Xin Chúa Giêsu Thánh Thể và Mẹ Maria luôn nâng đỡ, ban nhiều ơn lành và bình an đến quý vị và gia đình.

Kính thư,

LM Giuse Nguyễn Thanh Trùng Dương
Tuyên Ủy Sa Mạc

Tr. Augustino Hồ Sĩ Yên Thành
Sa Mạc Trưởng



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IMPORTANT DATES

1. Sa Mạc Phaolô II:

- From 7:00pm Friday, August 23rd, 2019
- To 3:00pm Sunday, August 25th, 2019
- Location: Daybreak Camp
6676 Rose Acres Lane, Felton, CA 95018

2. Precamp Date (Ngày Tiền Sa Mạc):

- Meet & Greet:
Date: Saturday June 1st 2019
Time: 10am – 3pm
Location: Most Holy Trinity Church
2040 Nassau Drive, San Jose, CA 95122



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ĐƠN THAM GIA SA MẠC PHAOLÔ II

Tên Thánh, Họ và Tên: _____

Email: _____

Phone: _____

T-shirt Size: _____ (please select from Youth Small to Adult XL)

Nghĩa Sĩ (please circle only 1): Cấp 1 Cấp 2 Cấp 3

Đoàn (please circle only 1): TMT THĐ KTVS JPII TĐV

Can you swim? (please circle only 1) Yes No

Medical Notices:

Kiểm nhận và chấp nhận của phụ huynh

Tôi tên _____ đồng ý và chấp nhận cho con tôi tên là

_____ tham dự Sa Mạc Phaolô II tại Daybreak Camp
6676 Rose Acres Lane, Felton, CA 95018. Từ ngày 23 tháng 8, 2019 đến ngày 25 tháng 8, 2019.

Tên Phụ Huynh

Chữ Ký Phụ Huynh

Ngày

Participant and guardian must also complete the PARTICIPANT AGREEMENT FORM (attached)

For Office Use Only:

Paid: _____ **Cash** or **Check #** _____

Received by: _____ **Đoàn** _____



PARTICIPANT AGREEMENT FORM

PARTICIPANT'S INFORMATION: (please print)

LAST NAME: _____ FIRST NAME: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____
PHONE #: _____ EMAIL: _____
BIRTHDATE: _____ Check if participant is a minor | GENDER: MALE FEMALE
PARISH: _____ DIOCESE: _____

HEALTH INFORMATION:

DOCTOR: _____ DOCTOR PHONE #: _____
INSURANCE CO.: _____ INSURANCE ID #: _____
INSURANCE GROUP #: _____ CARDHOLDER'S NAME: _____
PARTICIPANT'S ALLERGIES (including meds and food): _____

PARTICIPANT'S CHRONIC MEDICAL/PSYCHIATRIC CONCERNS or PHYSICAL RESTRICTIONS:
(e.g. diabetes; behavioral health related concerns, including alcohol/substance use; or physical disability):

EMERGENCY CONTACT:

NAME: _____ PHONE #: _____
RELATIONSHIP TO PARTICIPANT (must be a parent or guardian if participant is a minor): _____

WAIVER AND RELEASE:

I, _____, an adult [age of majority, per State (e.g., 18 years old in California)] and I am the named participant, or I am the parent/guardian of the minor who will be participating in the above-mentioned event ("The Event") organized and/or sponsored by the Vietnamese Eucharistic Youth Movement in the U.S.A ("VEYM"). I am fully aware that my or my child's participation in The Event is totally voluntary.

I am aware that The Event may involve the following activities but not limited to: running, jumping, sharing personal stories, singing, clapping, shouting, sitting for prolonged periods of time, early wake-up, sleeping in cabins, use of low-light restrooms, outdoor activities in dirt and rocky terrain, sleeping outdoors, activities relating to outdoor environment, aquatic activities and _____. In consideration of VEYM's agreement to permit me or my child to participate in The Event, the receipt and sufficiency in which consideration is hereby acknowledge, I agree as follows:

I, _____, hereby:

1. Grant permission to VEYM to use my child's photos/images that includes my child's name without any other personal identifiers to be published on the youth group's VEYM public Internet site or yearbook.



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- a. As I am aware, there are potential dangers associated with the posting of personally identifiable information on a web site since global access to the Internet does not allow us to control who may access such information. These dangers have always existed; however, we as a youth group do want to celebrate your child and his/her work. The law requires that we ask for your permission to use information about your child. b. Pursuant to law, we will not release any personally identifiable information without prior written consent from you as parent or guardian. Personally identifiable information includes participant's names, photo or image, residential addresses, e-mail address, phone numbers and locations and times of class trips. c. If you, as the parent or guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter to the head coordinator of your child's youth group and such rescission will take effect upon receipt by the school. _____
(please initial for concurrence)
2. Release, acquit and forever discharge VEYM and their employees, volunteers, agents, servants, officers, trustees, representatives, affiliates, and sponsors, in their official and individual capacities, as well as my Parish and my Diocese, their employees and agents, representatives, sponsors, chaperones, or volunteers, from any and all liability whatsoever for any and all damages, injuries (including death) to persons, loss to property, or both, which arise during, out of, or in connection with my participation in The Event, which may be sustained or suffered by me, my child or any person in connection with any activities of The Event, including, but not limited to, those related activities directly or indirectly leading up to and stemming from The Event, even those activities which arise out of my travel to and from The Event; _____ *(please initial for concurrence)*
3. Agree to indemnify (compensate for harm or loss), defend and hold harmless the VEYM and their employees, volunteers, agents, servants, officers, trustees, representatives, affiliates, and sponsors, in their official and individual capacities, as well as my Parish and my Diocese, their employees and agents, representatives, sponsors, chaperones, or volunteers, against all claims, including, but not limited to, claims of negligence, unintentional acts, and acts of omission, and from any and all liability, loss or damage they sustain as a result of any claims, demands, actions, causes of action, judgments, costs or expenses they incur, including attorney's fees, which result from or arise out of my or my child's participation in The Event, including but not limited to, my travel to and from The Event.
_____ *(please initial for concurrence)*

I hereby acknowledge and accept that:

4. There are certain inherent dangers and foreseeable and unforeseeable risks of harm to myself, my child and others arising from The Event's various activities, including but not limited to, sustaining bodily or emotional injury, that could result from my participation in The Event. I have knowingly and voluntarily decided to assume the risks of these inherent dangers in consideration of VEYM's permission to allow me or my child to participate in The Event; _____ *(please initial of concurrence)*
5. Weather conditions, including Acts of God, or natural causes (which humans do not intervene to cause), may alter or affect plans, expenses, and activities relating to, and including, The Event, and I understand that inherent dangers and risks of harm to myself, my child and others as a result of such natural causes



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may vary and I assume all foreseeable and unforeseeable risks of harm I or my child may be exposed to therefrom; _____ (*please initial for concurrence*)

6. My or my child's personal property may be at my risk of theft, damage or loss entirely; _____ (*please initial for concurrence*)
7. VEYM reserves the right to decline, to accept, or retain me or my child in The Event at any time should my actions or general behaviors impede the operation of The Event or the rights or welfare of any other person. I understand that I or my child may be required to leave The Event in the sole discretion of VEYM's agents and representatives. If I am or my child is required to leave, no refund will be given to me or my child for any unused portion of The Event, and VEYM will not reimburse me for any alleged direct or indirect costs or expenses I or my child incurred as a result of my or my child's participation in The Event. _____ (*please initial for concurrence*)
8. I understand that VEYM, in its sole discretion, reserves the right to cancel The Event or any aspect thereof prior to commencement. In the event of cancellation of The Event in whole or in part, I accept that I or my child may not be reimbursed or refunded for any unused portion of The Event. _____ (*please initial for concurrence*)

* I represent and warrant that I am or my child is covered throughout The Event by policy of comprehensive health and accident insurance which provides coverage for injuries which I or my child may sustain as part of my or my child's participation in The Event. Even if I am or my child is not covered by any health insurance during The Event, however, I agree to complete the HEALTH INFORMATION section to the best of my ability and, by its completion, I hereby release and discharge VEYM of all responsibility and liability for any injuries, illnesses, medical bills, charges or similar expenses I may incur while participating in The Event. By completing the form, I hereby authorize VEYM to obtain any necessary medical treatment to myself or my child, consent to any necessary examination, treatment, or care under the supervision and/or advice of any properly licensed medical professional, and I explicitly authorize VEYM to release medical information about me or my child to any person or entity to whom VEYM refers me for medical treatment. _____ (*please initial for concurrence*)

* I agree that this agreement is to be construed pursuant to the laws of the State of California and is intended to be as broad and inclusive as permitted by law, and if any portion thereof is held invalid, it is agreed that the balance hereof shall continue in full legal force and effect. In addition, I agree that any legal action arising out of or in relation to this agreement must be brought in Santa Clara County, California State court.

* To the extent that statute or case law does not prohibit releases for negligence, this release is also for negligence.

* I hereby grant VEYM my consent without reservation to use, assign, convey, reproduce, copyright, publish or sell my name, voice, image, and/or likeness that arise from my participation in The Event, whether still or



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motion pictures, audio or video tape, for promotional, instructional, business or any other lawful purposes, at VEYM's sole discretion.

IN SIGNING THIS AGREEMENT, I HEREBY ACKNOWLEDGE AND REPRESENT THAT I HAVE READ THIS ENTIRE DOCUMENT, THAT I UNDERSTAND ITS TERMS AND PROVISIONS, THAT I UNDERSTAND IT AFFECTS MY OR MY CHILD'S LEGAL RIGHTS, THAT IT IS A BINDING AGREEMENT, AND THAT I HAVE SIGNED IT KNOWINGLY AND VOLUNTARILY. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

BY SIGNING THIS RELEASE, I ALSO ACKNOWLEDGE THAT I UNDERSTAND ITS CONTENT AND THAT THIS RELEASE CANNOT BE MODIFIED ORALLY.

Signature of Participant or Guardian _____

Print Name: _____ Date: _____