

## Adult TEC Team Commitment Forms AND ATTACHMENT A

You must be over the age of 17 before the start of your team weekend to use these forms. **PLEASE READ THESE INSTRUCTIONS ENTIRELY BEFORE PROCEEDING!**

Everyone participating on a Bloomington/Normal Teens Encounter Christ (B/N TEC) Team is required to submit a completed application, before participating in the TEC Team Formation Process (which begins with your first team meeting). Additionally, it is the policy of the Peoria Diocese that all TEC participants **must** have on file with the local agent, a signed and **notarized** emergency medical treatment authorization and medical information sheet (Attachment A). There are six individual forms on five pages, below. **Please read each form carefully, complete all the forms, and sign where appropriate.** However, the last form is the "Volunteers Release", which you **may not** need to complete. See the instructions directly below the form before completing it.

### TEC Team Commitment Sheet

Please carefully read over the entire form and mark the appropriate response at the bottom, sign and date. Married team members should also complete the paragraph in the box at the bottom of the form.

### Volunteers Code of Conduct

Read and sign the "agreement regarding conduct." A copy of this document will be included in the binder you will receive at your first team meeting, for your future reference.

### Attachment "A"

Provide all of the individual information requested on both forms. **NOTARIZATION:** It is **not** necessary to sign this document in the presence of a Notary Public. However, you must appear before one to "attest" to the authenticity of your signature(s) on the document. All banks have Notary Publics. Most provide notarization as a free service, even if you don't have an account. There may be a notary where you work. Also, there are two Notaries on the TEC Board: Mike Marvin at 829-7196 or Cristina Deutsch at 828-2227.

**MEDICAL INFORMATION:** Please provide all of the medical information and emergency contact information requested. **BOLD** print indicates a required field. **Be as specific as possible, especially regarding allergies or reactions to medications.**

### Publicity Form

Read carefully, sign, print your full name, and date.

### Liability Waiver

Read carefully, insert your full name on the appropriate lines, sign, and date.

**DISPOSITION AND USE:** ATTACHMENT A is retained on file at the Bloomington/Normal TEC Office for four (4) calendar years from the date of execution. At the end of the applicable time period, the form is destroyed. Its primary purpose is to provide valid EMERGENCY CONTACT information, if needed. The secondary purpose is to be able to obtain emergency medical treatment for you in the unlikely event that your emergency point of contact cannot be reached. TEC Leaders with a NEED TO KNOW during the TEC Weekend and the B/N TEC Registrar are the only individuals that will have access to this information.

### Volunteer's Release

For verification of previous submission to a Illinois State Police criminal records check and DCFS Background Check. See the specific instruction and further information located on the same page.

**Questions or points for clarification? Call Mike Marvin, B/N TEC Registrar, at 309-829-7196.**

***These documents should be completed and returned to the address at the top of the Team Commitment Sheet, or given to your TEAM Leader, at least ONE WEEK prior to beginning of TEC Team Formation.***



Bloomington / Normal TEC TEAM  
P.O. Box 155  
Bloomington, Illinois 61702-0155

## Team Commitment Sheet

By saying yes to be on this team, I understand that the purpose of the nine (9) weeks of meetings before each TEC weekend is not so much a preparation process as it is one of formation. These nine weeks are a time for me to strive to form myself closer to the image of Christ. I do this by living the Paschal Mystery, dying to self; rising with Christ, and going forth in the Holy Spirit. As members of a TEC team I am called to set myself, my personality, and my own wants and needs aside; and allow Christ to become the center of my life and the TEC weekend.

By saying yes to being on this team, I understand I am saying yes to the following;

- 1) I agree to attending all the team meetings and Masses or Reflections for the team.
- 2) I will support TEC through works of charity, and wheat, both for the community and in my everyday life.
- 3) I will strive to live up to the basic obligations of membership in the community of faith;
- 4) I will strive to grow closer in unity of heart and mind to the church in which I am a member.
- 5) I understand that I am called to strive to bring Jesus to the center of the TEC weekend, my family, my workplace, and to let the light of Jesus shine on all of my human realities, by doing this, I will advance on my journey with Jesus as I help the candidates to begin or advance on their spiritual journey with our Lord Jesus Christ.
- 6) I understand that the Roman Catholic Church sponsors TEC so that on the weekends I agree I must support Her teachings on Marriage, Right to Life, and other moral teachings.
- 7) When I am on a team, I understand that the TEC community holds me up as a model or an example for the candidates. I understand that this means I must refrain from the illegal or excessive use of drugs or alcohol, and to strive to live a life of chastity.
- 8) I understand that a baptized Roman Catholic, who has formally joined another church, is not allowed to serve on a TEC team.

It is this yes that helps us to put Jesus at the center of our lives and at the center of each TEC weekend. After prayerful reflection on the above I state that, (Please mark ONLY one)

I have read and prayerfully considered the commitment sheet and will serve on this TEC team.

I have read and prayerfully considered the commitment sheet and cannot serve at this time.

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ / \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

Team Members Signature

Date: \_\_\_\_\_

### For married team members ONLY:

I am aware that it takes a large number of dedicated individuals behind the scenes to make a TEC weekend successful. I have discussed this possibility for service and "Wheat" with my spouse and he/she (  would ) (  would not ) like to receive additional information about the opportunities for personal involvement during my team weekend.

Spouse's Full Name: \_\_\_\_\_

## Volunteers Code of Conduct

Our children are the most important gifts God has entrusted to us. As a volunteer, I promise to strictly follow the rules and guidelines of this Volunteer's Code of Conduct as a condition of my providing services to the children and youth of Bloomington/Normal Teens Encounter Christ and the Catholic Diocese of Peoria.

**As a volunteer, I will:**

- ◆ Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity, and consideration.
- ◆ Avoid situations where I am alone with children and/or youth at activities.
- ◆ Use positive reinforcement rather than criticism, competition, or comparison when working with children and/or youth.
- ◆ Refuse to accept gifts from children and/or youth or their parents for my voluntary participation in youth activities.
- ◆ Refrain from giving gifts to children and/or youth without prior written approval from the parents or guardian and the pastor or administrator.
- ◆ Report suspected abuse to the pastor, administrator, or appropriate supervisor and The Department of Children and Family Services. I understand that failure to report suspected abuse to civil authorities is, according to the law, a misdemeanor.
- ◆ Cooperate fully in any investigation of abuse of children and/or youth.

**As a volunteer, I will not:**

- ◆ Smoke or use tobacco products in the presence of children and/or youth.
- ◆ Use, possess, or be under the influence of alcohol at any time while volunteering.
- ◆ Use, possess, or be under the influence of illegal drugs at any time.
- ◆ Pose any health risk to children and/or youth (i.e., no fevers or other contagious situations).
- ◆ Strike, spank, shake, or slap children and/or youth.
- ◆ Humiliate, ridicule, threaten, or degrade children and/or youth.
- ◆ Touch a child and/or youth in a sexual or other inappropriate manner.
- ◆ Use any discipline that frightens or humiliates children and/or youth.
- ◆ Use profanity in the presence of children and/or youth.

I understand that as a volunteer working with children and/or youth, I am subject to a thorough background check including criminal history and fingerprinting. I understand that any action inconsistent with this Code of Conduct or failure to take action mandated by this Code of Conduct may result in my removal as a volunteer with children and/or youth.

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Volunteers Printed Name

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Volunteers Signature

Date: \_\_\_\_\_



## PUBLICITY FORM

On occasion, Bloomington/ Normal Teen Encounter Christ (B/N TEC) takes photographs or makes audio or video tape recording of participants involved in activities. Such photographs or video records may be used by staff and participants to remember the activities or participants. In addition, such photographs and audio/visual recordings may be used by B/N TEC publications or advertising materials to let others know about B/N TEC. In addition, local news organizations may hear of our activities or event, and B/N TEC may invite or allow them to photograph or record our events to be used, distributed, or displayed as agents of B/N TEC see fit. This consent includes but is not limited to photographs, videotape, and audio recordings.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date: \_\_\_\_\_

W/CDOP 2/6/03

## LIABILITY WAIVER

(Adult-including group leaders and chaperones)

### RELEASE OF LIABILITY

I \_\_\_\_\_ (full name), agree on behalf of myself, my heirs, assigns, executors and personal representatives, to hold harmless and defend Bloomington Normal Teens Encounter Christ and the Catholic Diocese of Peoria, its officers, agents, employees or representatives associated with this activity from any and all liability claims, loss or damage arising from or in connection with my participation in this TEC Weekend.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date: \_\_\_\_\_

W/CDOP 2/6/03

## VOLUNTEER'S RELEASE

(If you have not previously accomplished an Illinois State Police Criminal Background Investigation with fingerprints and a DCFS CANTS background check, leave this form blank, see explanation below)

I, the undersigned, hereby acknowledge that I was fingerprinted, within the last five years, on or about the following date, \_\_\_\_\_, 20\_\_\_\_.

Month Day Yr.

A record of the results is onfile with the following agency, office, or parish:  
\_\_\_\_\_. The person to contact for verification is (Name)\_\_\_\_\_  
(Phone no.)\_\_\_\_\_.

I acknowledge that since being fingerprinted, I have not committed and/or been convicted of any criminal conduct. I further acknowledge that since being fingerprinted, I have not had any indicated findings by the Department of Children and Family Services filed against me.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Signature of Employee/Volunteer

\_\_\_\_\_  
Printed Name of Employee/Volunteer

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### CDOP Policy on Volunteer Compliance

The Peoria Diocese's policy on ADULT VOLUNTEERS working with MINOR children is clear and non-negotiable. "All adult TEC Team members(anyone over the age of 17) must have the DCSF CANTS Form and fingerprinting completed prior to the weekend" (-extracted from memo signed by Fr. Brian Brownsey, Director of Peoria Diocese Cursillo-TEC, Feb. 27, 2003) To read the B/N TEC official letter for administration of this policy, see the "Adult Compliance Policy" link on the Team Commitment Forms Page.

If you *have not* participated as a volunteer working with children since 2003, you may not be in compliance. However, you will receive a briefing on this subject during the second or third week of your Team formation and the opportunity to, very conveniently, complete ALL the necessary forms and get your fingerprints taken during one of your meetings.

If you *have* previously, within the last five year, submitted to a DCFS CANTS and ISP Criminal Records Check for an agency of the Diocese or your parish. We will verify that your file is current based on the information you provide above. Positive verification or resubmission is required before you can be on a TEC Team.

If you have questions about the policy or B/N TEC's administration of compliance with the Diocese's policy, please contact Mike Marvin, B/N TEC Registrar, at 829-7196.