



What is Your Story?

Check List

This form must be carefully read, marked, and signed once completed.

Please submit before **April 1, 2020** via email: Michael.Wellington@aohct.org or fax: 860-243-9690.

One form per parish/school

I, _____ (full name) group leader from
_____ (parish/school and town)

attest that I have collected and/or submitted all of the following forms:

- Intent to Participate Form
- Payment in the form of a check/money order made payable to: *OEEC Youth Encounter*
Mail to: Attn: Michael Wellington, 467 Bloomfield Avenue, Bloomfield, CT 06002
- Code of Conduct**
Please provided to each participant before the event.
- Youth Permission Form**
Signed and completed by each participant; **please bring copies of this form to the Encounter*
- Adult Waiver for Chaperones**
Signed and completed by each chaperone; **please bring copies of this form to the Encounter*

Office of Safe Environment Form (OSE):

- Chaperone Compliance Form**
Submitted to OSE before **April 10, 2020**; **please bring copies of this form to the Encounter*

Signature of Group Leader

Date

**Archdiocesan personnel may or may not ask to see copies of these forms at the Encounter; however, it is crucial that group leaders keep copies of these forms with them during the Encounter.*

Please be sure to periodically check the [Encounter webpage](#) for any updates.

We look forward to seeing you at the Encounter. Thank you!

