



Office use only	Deposit \$	Cash ( ) Check ( ) #
Date	Site #	

## Alternative Spring Break '12 – USA sites Application

A compassionate, meaningful and transforming service experience! **March 10-17, 2012**

**PLEASE READ CAREFULLY**

Complete the following application, and return it to the Student Volunteer Center, 500 Roosevelt Ave.

A \$25.00 NON-REFUNDABLE DEPOSIT MUST BE TURNED IN WITH YOUR APPLICATION.

**Total cost of trip is \$150.00. If registered by Feb. 1, 2012**

\$175 for applications received by **February 10, 2012**. Balance due on **Feb. 15** 2012

**Fee Includes:** Send Off Dinner, transportation, site fees, housing, meals on site and a t-shirt.

Make checks payable to: Newman Catholic Center with ASB on the memo line.

Name _____ ( F ) ( M ) Age _____				
Last	First	MI	Birth date ____/____/____	
<b>Local Address</b>				
Street		City	St.	ZIP
Phone: _____		email: _____		
Drivers License # (if over 21): _____		Expiration date ____/____/____		
Major: _____		Minor: _____		
Classification: ( )FR ( )SO ( )JR ( )SR ( )GRAD ( )FAC/STAFF ( )ALUMNI Year of Grad _____				
* If you do <b>not</b> attend EIU, please list the university (if any) at which you are currently enrolled: _____				
T-shirt size (circle one) S M L XL XXL				

**WHERE WOULD YOU LIKE TO SERVE?**

**You must put down at least three choices!!!** Only rank those you are interested in and realize you may not get your first choice. (See brochure for site descriptions) or call the SVC 217 348 0188. **\*These trips will involve faith-based reflection\***

<input type="checkbox"/> Big Oak's Boys Ranch @ Gadsen, AL <input checked="" type="checkbox"/> <del>Big Oak's Girls Ranch @ Springville, AL-FULL</del> <input type="checkbox"/> Operation Breakthrough @ Kansas City, MO <input type="checkbox"/> YMCA Sioux @ Dupree, ND <input type="checkbox"/> L'Arche Community @ Mobile, AL <input checked="" type="checkbox"/> <del>Project Lazarus @ New Orleans, LA -FULL</del> <input type="checkbox"/> Gesundheit Institute @ Arlington, VA	<input type="checkbox"/> Christian Appalachian Project @ Mckee, KY <input type="checkbox"/> Habitat For Humanity @ Jackson, MS <input type="checkbox"/> Habitat For Humanity @ Maryville, TN <input type="checkbox"/> Habitat For Humanity Coles County, IL <input type="checkbox"/> Catholic Worker @ Akron, OH <input type="checkbox"/> Glenmary Farm @ Vanceburg, KY <input type="checkbox"/> Land Between The Lakes @ Golden Pond, KY
--	---

Do you have a friend you want to be with? \_\_\_\_\_

**Which is more important? Your first choice ( ) or being with your Friend ( )?**

\*\*This may determine if your site choices are already full.

**Home Address**

Street \_\_\_\_\_ City \_\_\_\_\_ ST. \_\_\_\_\_ ZIP \_\_\_\_\_

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

Religious Affiliation: \_\_\_\_\_ Home Parish: \_\_\_\_\_

**CONTACT and MEDICAL INFORMATION**

In case of **emergency** contact: \_\_\_\_\_

Name Phone Relation to you

Emergency contact address if different than home: \_\_\_\_\_

Do you have the EIU Insurance? **If yes**, please state your "E" number \_\_\_\_\_

**If not** please complete the following (application will not be processed without this information):

Health Ins. Co. \_\_\_\_\_ Policy Number: \_\_\_\_\_

Do you have any medical conditions or allergies? \_\_\_\_\_

Are you on daily medication? \_\_\_\_\_ Please describe in case of emergency: \_\_\_\_\_

Dietary Needs? \_\_\_\_\_ Last TB shot: \_\_\_\_\_

**\*\*For Children's sites you will need TB shot and background check proof.**

**How did you hear about ASB?** Posters\_\_\_\_ DEN\_\_\_\_ Table-Tents\_\_\_\_ Friend\_\_\_\_ Facebook\_\_\_\_

Church\_\_\_\_ In class by teacher\_\_\_\_ In class by student\_\_\_\_ Other\_\_\_\_\_

**ALL PARTICIPANTS OF THE ASB 2012 PROGRAM**

- \* Must attend two meetings with your site leader prior to spring break.
- \* Must attend the Send Off Dinner on Thursday, **March 8<sup>th</sup> at 5:30 pm** if you are not working or in class.
- \* Must attend the ASB Reunion on Sunday, **March 25<sup>h</sup> at 4 pm.**
- \* Must participate in daily reflection with your site leader, group, and/or volunteer community.
- \* Must live in community with other volunteers. This includes sharing meals and following the rules set forth by your particular site.
- \* **These trips will involve faith-based reflection**

**ALCOHOL / DRUG FREE PHILOSOPHY**

The ASB program promotes an alcohol/drug-free philosophy. This prohibits alcohol consumption or illegal or irresponsible drug use by anyone, **regardless of age**, participating in the Alternative Spring Break. Any participant who does not adhere to this policy will be asked to leave the program, and return to his or her place of residence *at their own expense*. Support of this policy by all involved is essential for a safe and socially aware break.

Please initial here to indicate that you have read and fully understand this paragraph: \_\_\_\_\_

**\*\*\*If you have a conflict with any of these, please talk to the ASB Coordinator before completing this application.**

**APPLICATION ESSAY -Please elaborate.**

Please answer the following questions in full. Type your responses and attach your answers to your application.

**1. Have you been on ASB or a service related trip in the past? Where did you go?**

**2. What do you expect to get from this week?**

**3. What motivates you to apply for an Alternative Spring Break?**



## Rules for Volunteer Trips:

1. Volunteers will stay with the group the entire trip. Absolutely NOBODY will leave the volunteer site to go home, visit with relatives or friends or use this as an opportunity to go "site seeing" without the group.

2. There will be no use of alcohol or drugs on the volunteer trip.

3. The site leader and backup driver are the only persons allowed to drive the vans.

**Failure to adhere to these rules will result in the site leader sending the volunteer back to Charleston via bus or train at the volunteer's expense. That volunteer will also be banned from all volunteer trips the Student Volunteer Center offers for the remainder of his/her college career.**

I have read and understand the rules put forth by the Student Volunteer Center. I will abide by these and am willing to pay the consequences if I fail to follow these rules.

Signature \_\_\_\_\_ Date \_\_\_\_\_



**Release of Liability:**

WHEREAS, I wish to participate in the Alternative Spring Break Program;

WHEREAS, I understand that my work will consist of contributing to various projects; and,

WHEREAS, I understand I will be residing in community with other volunteers; and,

WHEREAS, I understand and recognize that there exists the possibility and risk of bodily injury to me or damage to my property while traveling to and from the community in which I am working, and during my stay and my participation in the program; and

WHEREAS, I acknowledge that my participation in the volunteer trip is voluntary and that I will receive no academic credit or monetary compensation for participation.

NOW, THEREFORE, for and in consideration of The Newman Catholic Center (Student Volunteer Center) allowing me to participate in the voluntary program, I hereby release, relieve, and hold harmless The Newman Catholic Center, its employees and representatives from any liability or claim of liability, including liability for bodily injury, death or property damage arising out of or in connection with my participation in the volunteer program, including my travel to, from and around the locations where I will be residing and working during the program, except such liability or claim of liability as may result from the gross negligence on the part of the Newman Catholic Center.

By signing below, I acknowledge that I have read the release of liability and am signing it voluntarily.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date