

Medical Form

Name: _____
Social Security Number: _____
Insurance Co.: _____
Group #: _____
Daytime Phone: _____

Health History: to be filled out by parent/guardian.

1. What is status of youth's health now?
{ } Excellent { } Good { } Fair
 2. Date of last tetanus toxoid
immunization _____
 3. Is youth presently under any medication? Yes ___ No ___
 4. Explain _____
-

(all medications must be in original container with youths name and instructions on the label)

Parent/ Guardian signs:

I give the above named child for whom I am legally responsible permission to attend A New Year in the Spirit held at the Cathedral Domain and sponsored by the Episcopal Diocese of Lexington.

I give my permission for the use of any photography or video that includes my child's image to be used publicly by the Cathedral Domain or the Diocese of Lexington.

I grant permission for said child to be transported and treated by medical personnel. I agree to hold harmless all representatives of the Episcopal Diocese of Lexington in regard to accident or injury involving the above named child at A New Year in the Spirit. I give permission to the Domain Personnel to arrange necessary related transportation for my child in the event of an emergency.

Signature/ Date _____/_____

“A NEW YEAR IN THE SPIRIT”

Junior & Senior High Youth Event

The Episcopal Diocese of Lexington

December 27-30, 2025



The Episcopal Youth Community presents

“A New Year in the Spirit”

Between Christmas and New Year’s
youth in grades 7 through 12 are invited to
attend a 4-day, 3-night event at

The Cathedral Domain

Check in will be:

December 27 from 3 until 5 PM

The event will conclude on

December 30 from 9 AM - 11 AM

The cost is for the entire event is **\$185.00!**

Scholarships Available

This includes meals, lodging, program and all
activities plus a great T-Shirt!

The term “A New Year in the Spirit” refers to an
attitude – a challenge- an effort to increase our
awareness of God’s will and the work of the Holy
Spirit in our lives. The intent is that we will come away
from the experience with a renewed sense of purpose
as young Christians.

Since we can only heat parts of the Domain –
registration will need to be limited.

First Come – First Served!

Deadline for registration is December 13

Any Questions?

Call Cindy Sigmon

(606) 464 - 8254

E-mail CSigmon@diolex.org

Fill out both sides of the form and mail with check & copy of
Insurance card to:

The Episcopal Diocese of Lexington
Cathedral Domain
830 Highway 1746
Irvine, KY 40336-8701
(please print clearly)

Name: _____

Age: _____ Grade: _____ M/F _____ T-shirt size _____

Address: _____

City: _____

ST: _____ Zip: _____

Phone _____

E-Mail: _____

Church: _____

Parent/Guardian

Name: _____

Community Covenant

Non-negotiable:

1. No use of Vapes; E-cigarette; alcohol; illegal drugs; or tobacco products.
2. No promiscuous activity.
3. No weapons of any kind.
4. No willful destruction of Domain or others' property.
5. No "raids"; hazing; food fights; inappropriate language; or pranks.

I understand that if I do not follow this covenant, I am choosing to be sent home at my own and my parents' expense.

Participant

signature _____

Parent/legal guardian

signature _____