

# The 2025 Virginia Synod Youth Assembly

Roanoke College, June 13-15, 2025 - **Delegate Registration and Credential Form**

**ADULTS ATTENDING AS STAFF:** PLEASE FILL OUT THIS FORM AND ALSO SEE SPECIAL INFORMATION AND INSTRUCTIONS AT THE SYNOD WEBSITE ([WWW.VASYNOD.ORG](http://WWW.VASYNOD.ORG) - CLICK ON THE EVENT INFORMATION LINK).

*Each congregation may send up to four delegates to the Youth Assembly from grades 7-12. An adult advisor from the congregation is NOT required. Starting May 19<sup>th</sup> congregations may contact the Youth Director Dave Delaney to see if there is room to send an additional youth delegate. Each participant must register on a separate form. The "Expectations" section of this form **MUST** be completed and signed! More details are available in the "Youth Assembly Information Sheet for Pastors, Parents, and Youth Workers." Questions should be directed to Virginia Synod Youth Director Dave Delaney in the Synod Office – cell: 540-529-6893 / [delaney@vasynod.org](mailto:delaney@vasynod.org). Return completed forms to: Virginia Synod Youth Assembly, PO Box 70, Salem VA 24153 / fax# 540-389-5962. An additional form (also available at the synod website) providing the participant's health and emergency information must also be completed.*

PLEASE PRINT CLEARLY!! SIGNATURES REQUIRED ON BOTH PAGES !!

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**Current** (2024-2025) Grade Level (07-12, or AD) : \_\_\_\_\_

Please check one for housing: [ ] Male [ ] Female

Home or Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Participant's Phone: (\_\_\_\_\_) \_\_\_\_\_ email address: \_\_\_\_\_

Home Congregation Name: \_\_\_\_\_ Location of Congregation: \_\_\_\_\_

Name of Pastor: \_\_\_\_\_

*(If your congregation does not currently have a pastor, please list the name of another adult attending the Main Assembly)*

Roommate request (**PLEASE** confirm this with the other person): \_\_\_\_\_

Special housing or dietary needs: \_\_\_\_\_

Circle your t-shirt  
size:  
XS S M L  
  
XL XXL XXXL  
(or)  
No shirt, thanks

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**ALL YOUTH ASSEMBLY PARTICIPANTS MUST BE HOUSED ON CAMPUS FOR THE ASSEMBLY.**

ESTIMATED TIME OF ARRIVAL IF YOUTH DELEGATE MUST ARRIVE LATE (after 12:00 noon on Friday, June 13) FOR ANY REASON: \_\_\_\_\_

## **YOUTH DELEGATE CERTIFICATION (SIGNATURE REQUIRED!)**

This is to certify that the person named above has been selected to represent: \_\_\_\_\_  
(name and location of congregation)

➔ Signed (*signature of **pastor or lay president***) \_\_\_\_\_ Date: \_\_\_\_\_

➔➔➔ **THREE SIGNATURES ARE REQUIRED ON THE BACK OF THIS FORM:** participant, parent/guardian, one Main Assembly voting member who can be a congregational emergency contact during the youth assembly.

Total amount due for the Youth Assembly is **\$190.00**  
(\$175 if postmarked on or before May 19, 2025).

**Mail Registration Form To:**  
**Youth Assembly**  
**The Virginia Synod, ELCA**  
**P.O. Box 70**  
**Salem VA 24153**

### **Method of Payment:**

- ☐ Check payable to Virginia Synod, ELCA (with "YOUTH ASSEMBLY" in memo line!)
- ☐ Paid Online @Vasynod.org - click "Give" tab and find the Youth Assembly tile

STARTING MAY 19<sup>TH</sup> CONGREGATIONS MAY REGISTER AN ADDITIONAL YOUTH DELEGATE IF SPACE PERMITS. PLEASE CALL (540-529-6893) OR EMAIL Dave Delaney - [delaney@vasynod.org](mailto:delaney@vasynod.org) – TO SEE IF ADDITIONAL SPACES ARE AVAILABLE.

**THIS SECTION MUST BE READ AND SIGNED BY THE PARTICIPANT, THE PARENT/GUARDIAN, AND EITHER THE CONGREGATION PASTOR OR ANOTHER ADULT WHO WILL BE PRESENT AT THE ASSEMBLY**

**Expectations for Youth and Adults at the Virginia Synod 2025 Youth Assembly:**

- Each Participant must complete the **permissions and emergency information form**.
- Participants will **participate fully** in all activities of the Youth Assembly.
- Participants will wear their **event name tag** visibly at all times.
- Participants will **abide** by the established guidelines, procedures, and expectations for the Youth Assembly.
- Participants will **show full respect** to the Youth Assembly adults and leaders as well as the staff of Roanoke College.
- Participants will **remain** on the Roanoke College Campus for the duration of the Assembly unless special permission from Youth Director Dave Delaney is obtained by one of the adults responsible for the youth participant.
- **No weapons, alcohol, or drugs** other than required medications may be brought to the event.
- The curfew, lights out times, and other requirements necessary for the safety of every person and the smooth running of our event will be **conscientiously observed**.
- All participants in Youth Ministry events sponsored by the Virginia Synod must adhere strictly to the Synod's **official guidelines** protecting individuals from bullying, sexual harassment, or other sexual misconduct. No unwelcome touching or suggestive or other inappropriate language is permitted.

***All delegates to the Youth Assembly, one of their parents or a guardian, and their pastor or another voting member who will be at the Main Assembly must read these expectations and sign the registration form indicating their agreement to abide by them.***

**AGREEMENT TO EXPECTATIONS (THREE SIGNATURES ARE REQUIRED!)**

I agree to abide by the expectations of the event.

➔ Signed \_\_\_\_\_ Date: \_\_\_\_\_  
(signature of **participant**)

I have read the expectations for participants in this event and agree to support the Event staff in the administration of these expectations.

➔ Signed \_\_\_\_\_ Date: \_\_\_\_\_  
(signature of **parent** or guardian of participant under 18 at the time of the Youth Assembly)

I agree to assist the staff of the Youth Assembly in the event of an emergency or disciplinary situation involving the youth from my congregation

➔ Signed \_\_\_\_\_ cell phone: \_\_\_\_\_  
(signature of congregation **pastor or other congregation voting member** who will be present at the Assembly)

PRINTED NAME OF THIS CONTACT PERSON: \_\_\_\_\_