

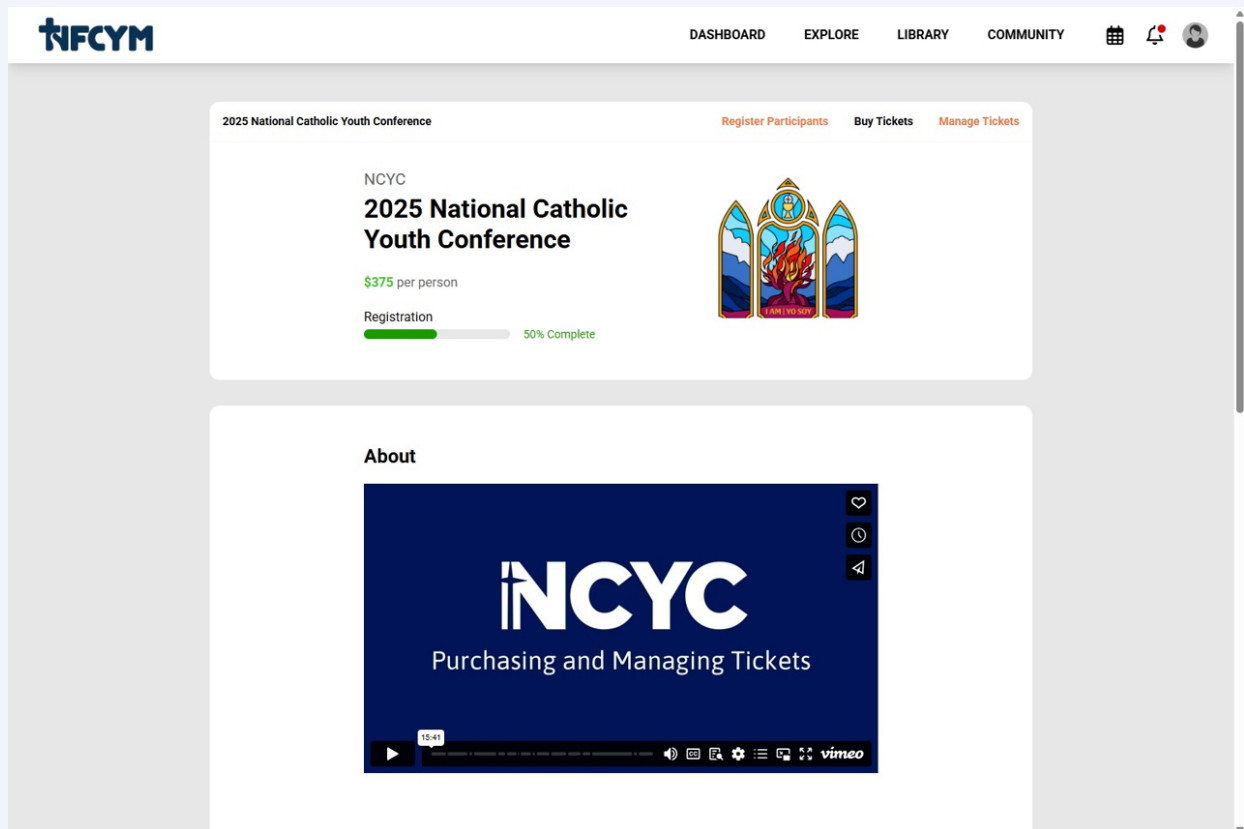
Parent/Guardian or Adult Chaperone Registration Instructions

1

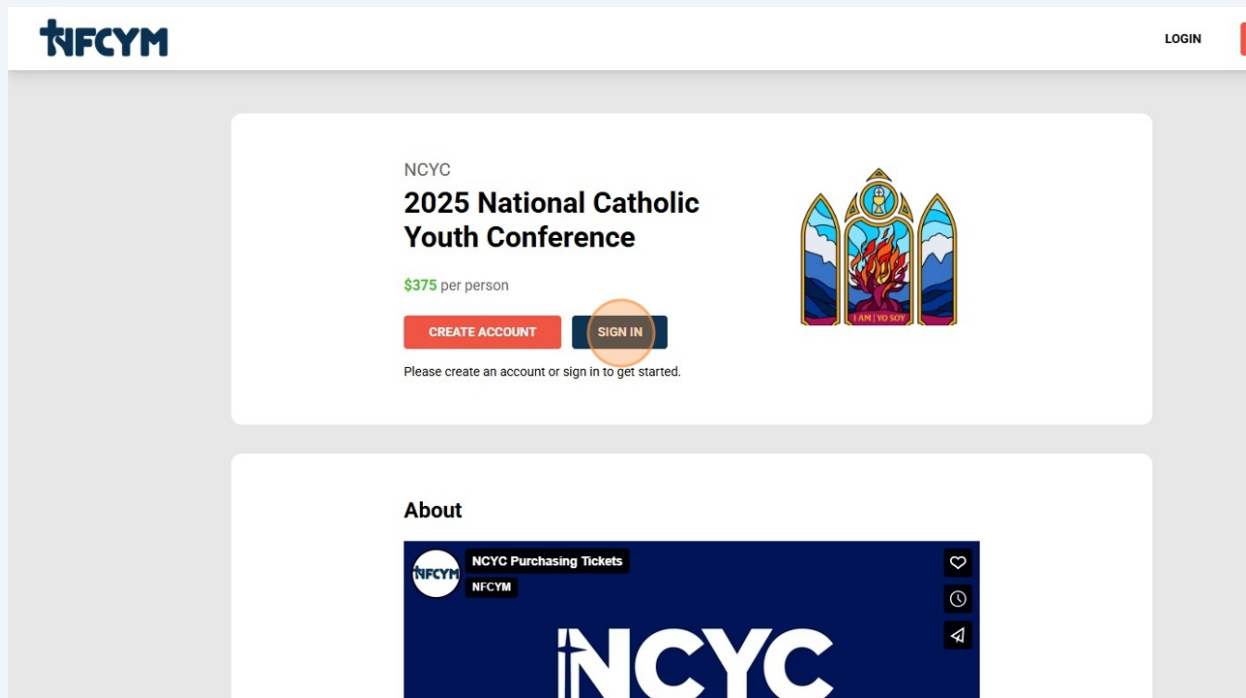
Check your email for a message from NFCYM. The subject will be "You've received Tickets for 2025 National Catholic Youth Conference!" Within that email, click the "View" button to begin the process.

2

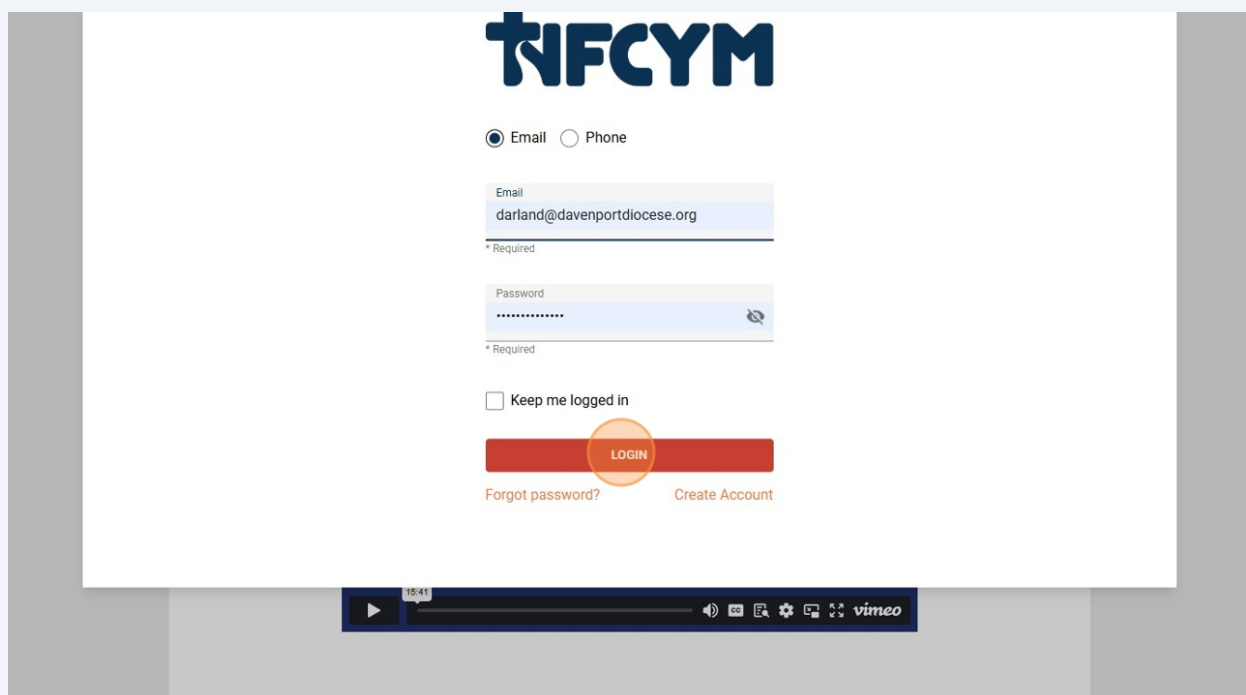
Navigate to <https://nfcym.lead4ms.com/register/group/437/>



3 Click "Create an Account" or "Sign In", as applicable



4 Click "Login"





5 Scroll down and click "Add Participant"

empowerment, providing an unparalleled opportunity to deepen your faith and connect with peers from across the nation.

Join us from **November 20-22, 2025**, at the Indiana Convention Center and Lucas Oil Stadium in Indianapolis for an event that promises to inspire and energize your spiritual journey. Don't miss this chance to be part of a vibrant community celebrating the joy of being young and Catholic. Secure your tickets now and prepare for an unforgettable experience that will ignite your faith and empower you to live boldly for Christ.

Questions? Contact ncyc@nfcym.org.

 **ADD PARTICIPANT**

 **2025 Participant Registration**

This is the registration form for the individual named below. If you do not intend to register this person, please exit this form now by clicking on the X on...

START



If you are attending NCYC with your child, you will need to complete the steps below for yourself as well as for them. If you have multiple people from your household attending, repeat the steps below as needed.

6 If completing for yourself, choose "Me".


If completing for a child, click "New Family Member"


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Add Participant

Select participant or choose **New Family Member** if participant is not listed.

 Me





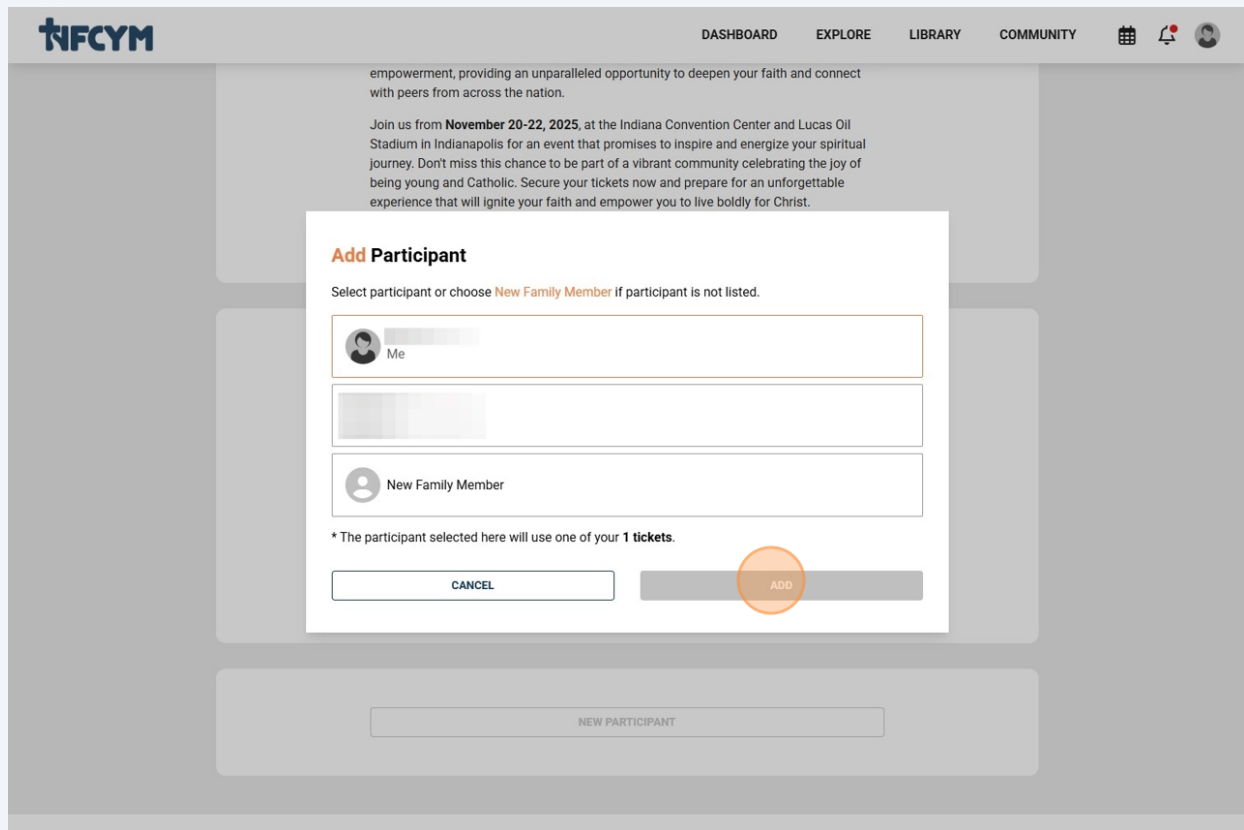
 New Family Member

* The participant selected here will use one of your **1 tickets**.

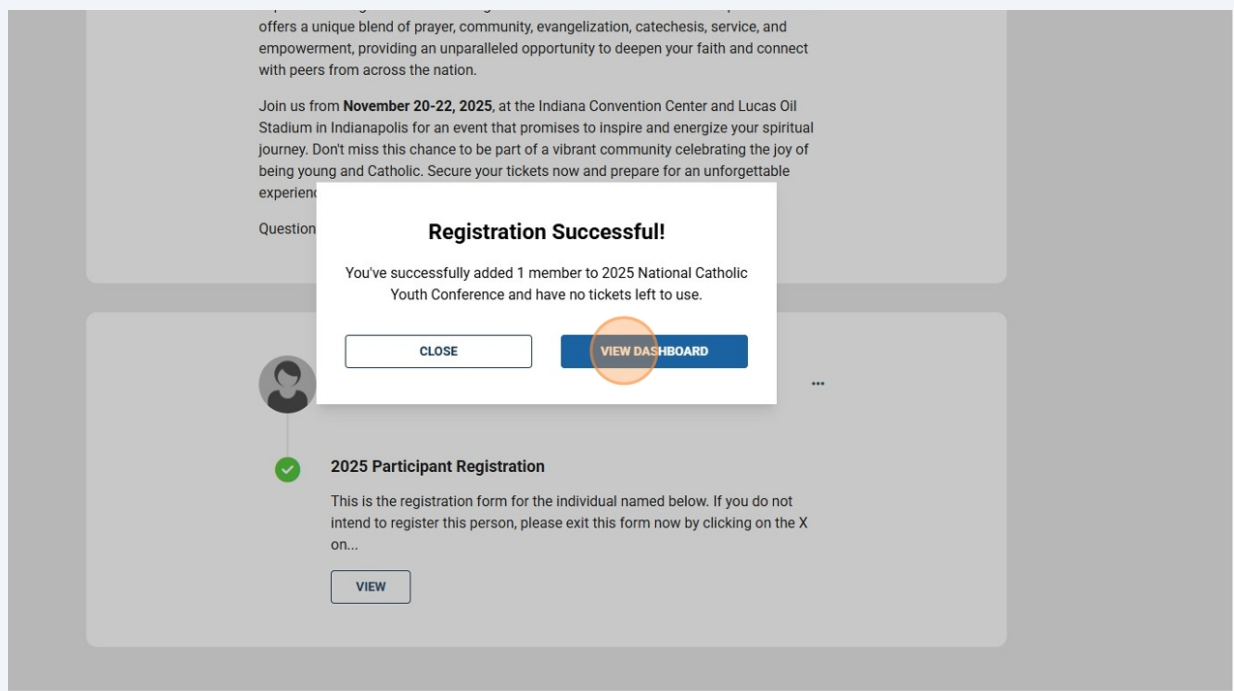
CANCEL

ADD

7 Click "Add"



8 Click "View Dashboard"



9

Scroll to the bottom of the webpage and click "Start"



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Questions? Contact ncyc@nfcym.org.



Colleen Darland

Me

...

2025 Participant Registration

This is the registration form for the individual named below. If you do not intend to register this person, please exit this form now by clicking on the X on...

START

NEW PARTICIPANT


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10 Click "View"

with peers from across the nation.


Join us from **November 20-22, 2025**, at the Indiana Convention Center and Lucas Oil Stadium in Indianapolis for an event that promises to inspire and energize your spiritual journey. Don't miss this chance to be part of a vibrant community celebrating the joy of being young and Catholic. Secure your tickets now and prepare for an unforgettable experience that will ignite your faith and empower you to live boldly for Christ.

Questions? Contact ncyc@nfcym.org.

**Colleen Darland**
Me

**2025 Participant Registration**

This is the registration form for the individual named below. If you do not intend to register this person, please exit this form now by clicking on the X on...




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[DASHBOARD](#) [EXPLORE](#) [LIBRARY](#) [CC](#)

11 Agree to electronic records and signatures.

2025 Participant Registration

This is the registration form for the individual named below. If you do not intend to register this person, please exit this form now by clicking on the X on the right side of the white border above.

**Colleen Darland**
Me

Consent to Electronic Records and Signatures

☐ By proceeding with this form, you agree to use electronic records and signatures.

I am completing this form on behalf of:

Please double-check that the person named above matches the selection below.

☐ My child (youth participant)


☐ Myself (adult participant)

☐ Myself (I am a priest or deacon)

12

Choose your participation "Myself (Adult Participant)" or "Myself (I am a priest or deacon)"

...this person, please exit this form now by clicking on the X on the right side of the white border above.

 Colleen Darland
Me

Consent to Electronic Records and Signatures

☒ By proceeding with this form, you agree to use electronic records and signatures.

I am completing this form on behalf of:

Please double-check that the person named above matches the selection below.

- ☐ My child (youth participant)
☐ Myself (adult participant)
☐ Myself (I am a priest or deacon)

13

Enter your contact information

☒ By proceeding with this form, you agree to use electronic records and signatures.

I am completing this form on behalf of:

Please double-check that the person named above matches the selection below.

- ☐ My child (youth participant)
☒ Myself (adult participant)
☐ Myself (I am a priest or deacon)

Name

First Last
* Required * Required

Mobile Number

14 Provide an emergency contact

Emergency Contact

The group leader is primarily responsible for calling emergency contacts. NFCYM will utilize this information only in the unlikely event the group leader cannot make the call.

Emergency Contact's Name

First	Last
<small>* Required</small>	<small>* Required</small>

Emergency Contact's Relationship to Participant

- ☐ Immediate Family Member
- ☐ Extended Family Member
- ☐ Friend
- ☐ Neighbor

15 Review the Nature of Risks Waiver

elevated risk of being exposed to illness. By coming to NCYC, I understand and agree to assume these inherent risks. If I experience symptoms of illness while at NCYC, I may be required to leave the Facilities—the cost of testing, isolation/quarantine, care, and transportation remain my responsibility.

Further, I understand that voluntarily traveling to and attending an event of this nature may involve certain other risks beyond the reasonable control of NFCYM, its officers, directors, volunteers, and agents in connection with NCYC ("NFCYM et al.") and my organization and its respective officers, directors, volunteers, agents, chaperones, or representatives associated with NCYC ("Organization et al."), including but not limited to accidents, emergencies, exposure to reckless conduct of other persons, and/or negligence of security and medical personnel, and NFCYM et al. and Organization et al. disclaim any responsibility for any such risks. During any break in NCYC, there may be opportunities for me to participate in activities away from the Facilities. Whether at the Facilities or away, I participate at my own risk and am subject to all terms and conditions of my registration ("Legal Agreement") and/or set by any recreational or other providers.

☐ I have read, understand, and agree.

Consent to Search, Record, and Contact (Adult)

I consent in advance to a reasonable search of my person and personal carry-in items by NFCYM, the Facilities, or law enforcement officials as deemed necessary for security purposes.

I also consent to being recorded, photographed, videotaped, or filmed within and about the areas to which NCYC access is permitted, waiving all claims and rights relating to the production, acquisition, sale, usage, and distribution of such material in any form now known or later in use, worldwide.

16 Review the search and media release

☒ I have read, understand, and agree.

Consent to Search, Record, and Contact (Adult)

I consent in advance to a reasonable search of my person and personal carry-in items by NFCYM, the Facilities, or law enforcement officials as deemed necessary for security purposes.

I also consent to being recorded, photographed, videotaped, or filmed within and about the areas to which NCYC access is permitted, waiving all claims and rights relating to the production, acquisition, sale, usage, and distribution of such material in any form now known or later in use, worldwide.

Further, I consent to NFCYM sending me occasional mail or email. I understand NFCYM will not sell or share my information with others, and I may opt out of email at any time.

☐ I have read, understand, and agree.

General Release & Waiver of Liability/Covenant Not to Sue/Hold Harmless (Adult)

This is a "General Release," which means I am giving up important legal rights and remedies available to me and my heirs, successors, and assigns ("Our Behalf"); it is to be construed in the broadest possible manner.

17 Review the Liability/Hold Harmless Waiver

This is a "General Release," which means I am giving up important legal rights and remedies available to me and my heirs, successors, and assigns ("Our Behalf"); it is to be construed in the broadest possible manner.

For value received, I agree on Our Behalf to assume all risks and generally release and waive any liability of any nature whatsoever against, and agree to hold harmless, NFCYM et al. and Organization et al. concerning any actions, claims, or demands that may be made or brought on Our Behalf against NFCYM et al. and/or Organization et al. arising out of or in connection with my travel to or attendance at NCYC, or any other activity I may engage in while in the Indianapolis area. In addition, and not by way of limitation, I further agree that I will abide by any terms and conditions imposed by name badges or credentials.

A "Covenant Not to Sue" is a legal term that means a person promises not to file a lawsuit. It is different from the General Release of claims above. Besides waiving and releasing the claims covered above, I covenant on Our Behalf not to sue and promise never to file or prosecute any legal claim of any kind against NFCYM et al. and Organization et al. in any federal, state, or municipal court, asserting any claims that are released by this Agreement. I am also waiving any right to monetary recovery on Our Behalf.

Further, for value received, for any injury to third parties that may arise because of my actions or omissions, I agree on Our Behalf to hold harmless and indemnify and defend NFCYM et al. and Organization et al. with respect to any actions, claims, expenses, or demands arising therefrom that may be made or brought against NFCYM et al. and/or Organization et al., including but not limited to reasonable attorneys' fees and expenses arising in connection therewith. Any disputes under this Legal Agreement will be governed by Indiana law without regard to conflicts, and the venue will be in Indianapolis. I agree on Our Behalf to resolve by mediation prior to filing any court action.

☐ I have read, understand, and agree.

18 Review the Limited Medical Permission consent

Medical Permissions--Limited (Adult)

As a condition of attending NCYC at the Facilities, in the event of an emergency or accident rendering me unconscious, I grant permission on Our Behalf for emergency medical care to be administered within the Facilities and/or during or after transportation to a hospital or doctor for emergency medical care.

I understand that in Indiana, a person may claim Good Samaritan defenses for providing gratuitous emergency care in good faith at any emergency or accident scene. I further understand it is not NFCYM et al.'s responsibility to attempt to reach my emergency contact, and I remain responsible for my medical expenses.

☐ I have read, understand, and agree.

NFCYM Code of Conduct and NCYC Behavior Guidelines (Adult)

Before signing this agreement, I reviewed [NFCYM's Code of Conduct](#) ("Code") and [NCYC Behavior Guidelines](#) ("Guidelines"). I agree to abide by both and any other rules and regulations set by NFCYM et al. or Organization et al.

I understand that failure to abide by the Code or Guidelines in any way may result in my dismissal from NCYC with no right of reimbursement or refund for any amount from NFCYM et al. or Organization et al., and my travel home is my responsibility.

19 Review "NFCYM's Code of Conduct"

medical care to be administered within the Facilities and/or during or after transportation to a hospital or doctor for emergency medical care.

I understand that in Indiana, a person may claim Good Samaritan defenses for providing gratuitous emergency care in good faith at any emergency or accident scene. I further understand it is not NFCYM et al.'s responsibility to attempt to reach my emergency contact, and I remain responsible for my medical expenses.

☒ I have read, understand, and agree.

NFCYM Code of Conduct and NCYC Behavior Guidelines (Adult)

Before signing this agreement, I reviewed [NFCYM's Code of Conduct](#) ("Code") and [NCYC Behavior Guidelines](#) ("Guidelines"). I agree to abide by both and any other rules and regulations set by NFCYM et al. or Organization et al.

I understand that failure to abide by the Code or Guidelines in any way may result in my dismissal from NCYC with no right of reimbursement or refund for any amount from NFCYM et al. or Organization et al., and my travel home is my responsibility.

☐ I have read, understand, and agree.

Risk of Loss (Adult)

20 Review "NCYC Behavior Guidelines"

to a hospital or doctor for emergency medical care.

I understand that in Indiana, a person may claim Good Samaritan defenses for providing gratuitous emergency care in good faith at any emergency or accident scene. I further understand it is not NFCYM et al.'s responsibility to attempt to reach my emergency contact, and I remain responsible for my medical expenses.

☒ I have read, understand, and agree.

NFCYM Code of Conduct and NCYC Behavior Guidelines (Adult)

Before signing this agreement, I reviewed [NFCYM's Code of Conduct](#) ("Code") and [NCYC Behavior Guidelines](#) ("Guidelines"). I agree to abide by both and any other rules and regulations set by NFCYM et al. or Organization et al.

I understand that failure to abide by the Code or Guidelines in any way may result in my dismissal from NCYC with no right of reimbursement or refund for any amount from NFCYM et al. or Organization et al., and my travel home is my responsibility.

☐ I have read, understand, and agree.

Risk of Loss (Adult)

I understand and agree on Our Behalf to assume the risk of loss of any nonrefundable or other costs associated with participation in NCYC. Further, I understand I must return

21 Agree to both

☒ I have read, understand, and agree.

NFCYM Code of Conduct and NCYC Behavior Guidelines (Adult)

Before signing this agreement, I reviewed [NFCYM's Code of Conduct](#) ("Code") and [NCYC Behavior Guidelines](#) ("Guidelines"). I agree to abide by both and any other rules and regulations set by NFCYM et al. or Organization et al.

I understand that failure to abide by the Code or Guidelines in any way may result in my dismissal from NCYC with no right of reimbursement or refund for any amount from NFCYM et al. or Organization et al., and my travel home is my responsibility.

☐ I have read, understand, and agree.

Risk of Loss (Adult)

I understand and agree on Our Behalf to assume the risk of loss of any nonrefundable or other costs associated with participation in NCYC. Further, I understand I must return home at my expense if I suffer an illness, accident, emergency, or incident (such as a Code or Guideline infraction) requiring my dismissal from NCYC or if NCYC must be discontinued due to an incident, accident, or emergency; I have no right of reimbursement or refund for any amount in connection with therewith from NFCYM et al. or Organization et al.

22 Acknowledge the Risk of Loss

Risk of Loss (Adult)

I understand and agree on Our Behalf to assume the risk of loss of any nonrefundable or other costs associated with participation in NCYC. Further, I understand I must return home at my expense if I suffer an illness, accident, emergency, or incident (such as a Code or Guideline infraction) requiring my dismissal from NCYC or if NCYC must be discontinued due to an incident, accident, or emergency; I have no right of reimbursement or refund for any amount in connection with therewith from NFCYM et al. or Organization et al.

☐ I have read, understand, and agree.

Insurance (Adult)

I understand that purchasing travel or other insurance independently or through my group may mitigate potential loss; it is up to me to inquire about the availability of an appropriate policy.

- ☐ YES - I have purchased a travel or other insurance package to manage any risks I may experience by attending NCYC.
- ☐ NO - I knowingly declined to purchase an insurance package and acknowledge declining this risk management opportunity.

23 We are not purchasing travel insurance on your behalf. Please undertake at your own behest.

☒ I have read, understand, and agree.

Insurance (Adult)

I understand that purchasing travel or other insurance independently or through my group may mitigate potential loss; it is up to me to inquire about the availability of an appropriate policy.

- ☐ YES - I have purchased a travel or other insurance package to manage any risks I may experience by attending NCYC.
- ☐ NO - I knowingly declined to purchase an insurance package and acknowledge declining this risk management opportunity.

Acceptance (Adult)

I fully understand that I will not receive credentials onsite for my voluntary NCYC participation unless I review and consent to the terms of this Agreement. I fully understand and accept the consequences of and knowingly, freely, and willingly sign this LEGAL AGREEMENT - GENERAL RELEASE, COVENANT NOT TO SUE, LIABILITY WAIVER, AND PERMISSION AGREEMENT. If any provisions of this Agreement shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. I agree on my behalf and my heirs, successors, and assigns.

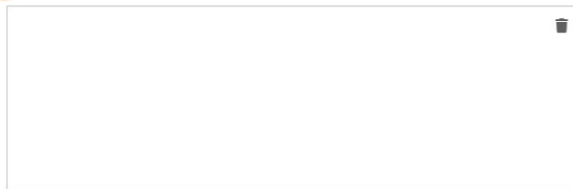
24 Final signature/acknowledgement

Acceptance (Adult)

I fully understand that I will not receive credentials onsite for my voluntary NCYC participation unless I review and consent to the terms of this Agreement. I fully understand and accept the consequences of and knowingly, freely, and willingly sign this LEGAL AGREEMENT - GENERAL RELEASE, COVENANT NOT TO SUE, LIABILITY WAIVER, AND PERMISSION AGREEMENT. If any provisions of this Agreement shall be held to be invalid or unenforceable for any reason, the remaining provisions shall continue to be valid and enforceable. I agree on my behalf and my heirs, successors, and assigns.

Signature Style

☐ Auto ☒ Draw



Your electronic signature is legally binding. For details, see our [Terms of Service](#).


25 Date completed



Your electronic signature is legally binding. For details, see our [Terms of Service](#).

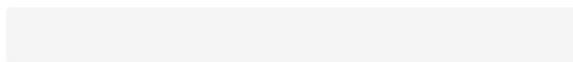
Signature Date

Please select the date that this legal agreement is signed.

mm/dd/yyyy 

* Required

Email



* Required

26 Enter your email for confirmation

The screenshot shows a web form with two main sections. The first section is titled "Signature Date" and contains the instruction "Please select the date that this legal agreement is signed." Below this is a date picker showing "06/10/2025" with a calendar icon to its right. A small asterisk and the word "Required" are at the bottom left of this section. The second section is titled "Email" and contains an empty text input field. A small orange circle is positioned to the left of the input field, and a small asterisk and the word "Required" are at the bottom left of this section. At the bottom right of the form, there is a small square icon with a lock symbol and a red "SUBMIT" button. The footer of the page reads "© 2025 Fivable, LLC and National Federation for Catholic Youth Ministry ©".

Signature Date
Please select the date that this legal agreement is signed.

06/10/2025

* Required

Email

* Required

LOCK SUBMIT

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27 Click "Submit"

This screenshot is identical to the one in step 26, but with an orange circle highlighting the red "SUBMIT" button at the bottom right. The date in the "Signature Date" field remains "06/10/2025", and the "Email" field remains empty. The footer text is also the same: "© National Federation for Catholic Youth Ministry ©".

Signature Date
Please select the date that this legal agreement is signed.

06/10/2025

* Required

Email

darland@davenportdiocese.org

* Required

LOCK SUBMIT

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