



Metrotown Institute

DELEGATE APPLICATION

June 12 – June 15, 2017

Riverside Presbyterian Church

849 Park Street Jacksonville, FL 32204

What is Metrotown Institute?

The OneJax Metrotown Institute is a gathering of high school students, entering grades 10-12, who come together to explore options for living successfully in an increasingly diverse and inter-dependent world. At Metrotown Institute students share ideas and feelings, discover their own unique talents, experience a variety of perspectives on diversity issues, multicultural communication, religious traditions, gender roles, and self-esteem. Participants create strategies for living and working with a multitude of differences.

The goal of Metrotown Institute is to promote respect and understanding among all people. This goal is achieved through small group discussions and workshops, creative and artistic expression, recreation, outdoor experiences, and personal reflection on our diverse community. Be prepared! When you've completed Metrotown, you'll see the world through different eyes and you will have made a lasting and positive difference in your own life, and in the lives of your new friends.

How do I become a Metrotown Delegate?

Students are usually referred by an adult friend, a teacher, counselor, clergy, community leader, or parent who recognizes the gifts you have to offer. The referring adult is considered your Sponsor. In some cases, a sponsor may assist financially with the registration fee. You must complete the enclosed application form to apply for Metrotown Institute. Please fax to 904.620-5604 or mail the completed forms to:

**OneJax Institute
University of North Florida
1 UNF Drive
Building 53, Suite 2750
Jacksonville, Florida 32224**

Shortly after receipt of your application, a OneJax staff member will contact you about your next steps toward becoming a delegate in the 2017 Metrotown Institute. *This year's Metrotown will be held:*

When: Monday, June 12 – Thursday, June 15, 2017 - Monday 8a.m.-5p.m., Tuesday 9a.m.-5p.m., Wednesday 9a.m.-5p.m., and Thursday 9a.m.-9p.m..

Where: Riverside Presbyterian Church, 849 Park Street, Jacksonville, FL 32204

The OneJax Metrotown Institute of 2017 supported with funding from:



How Much Does It Cost?

The delegate's financial responsibility for the 4 days is a \$150 Registration Fee. Breakfast and lunch is provided daily and dinner is provided on Thursday night. We have plenty of snacks in the day time. Insurance, educational and resource materials, transportation needs, and use of site facilities are covered through the generosity of our sponsors. Delegates are encouraged to contribute or find support for as much of the Institute cost as possible.

Financial assistance is available based on need. No one will be prevented from attending because he or she cannot afford the registration fee. If participation depends upon receiving financial assistance, please check the financial assistance box on the application form. This information is necessary for processing and will be kept confidential.

OneJax is a non-sectarian, nonprofit agency dedicated to increasing understanding and respect among people across all differences. Our human relations programs are carefully designed to support the development of responsible and caring citizens – people who are equipped to meet the challenges and seize the opportunities of our diverse and interdependent world.

Metrotown Institute Application Form should be returned as soon as possible for review, but not later than May 29, 2017 to: Deidre Lane, Program Manager
For additional information, please contact Ms. Lane at OneJax: 904.620.1529
onejax.lane@unf.edu

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Metrotown Institute



June 12 – 15, 2017



Global Citizens, Different Together

Riverside Presbyterian Church
849 Park Street

Monday 8a.m.-5p.m.
Tuesday 9a.m.-5p.m.
Wednesday 9a.m.-5p.m.
Thursday 9a.m.-9p.m.

Delegate Application Form

Please complete each section fully and accurately.

First Name:	Middle Initial:	Last Name:	
The name I prefer to be called is:		Date of Birth:	
Age:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender		
Home Address:	City:	State:	Zip:
Home Telephone:	Cell phone:		
Email Address:			
High School:	Grade for 2017/2018 School Year: <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 Please check box		
<i>To ensure diversity at Metrotown Institute, please provide the following information:</i>			
Cultural/Racial Heritage:			
Religious/Faith Affiliation:			
I have participated in a OneJax event before: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, which event/s?	
How did you hear about Metrotown Institute?			
T-Shirt Size: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> Extra Large <input type="checkbox"/> 2X Large <input type="checkbox"/> 3X Large			

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MY SPONSOR INFORMATION

A **Sponsor** is a guidance counselor, teacher; youth group leader, religious leader, or parent who knows you and can support your participation in this year's Metrotown Experience.

Name of Sponsor:	Telephone:
Organization:	Position Title:
Sponsor Address:	Email Address:
Sponsor's Signature:	Date Signed:
Relationship to Applicant:	
ALL SECTIONS SHOULD BE COMPLETED AND RETURNED AS SOON AS POSSIBLE, BUT NOT LATER THAN May 29, 2017	

Name of Applicant (Print or Type)

Parent/Guardian Consent

I give permission to the applicant named above to participate in the OneJax Metrotown Institute.

Name of Parent/Guardian (Print or Type)

Signature of Parent/Guardian

PAYMENT INFORMATION

Please make checks payable to *OneJax*.

⇒ After June 5, 2017, no refunds will be issued.

- \$150 registration enclosed
- Sponsor's contribution enclosed: \$_____
- I would like to be considered for financial assistance. Please send a financial assistance application form.
- I need transportation: Morning Afternoon

All Application Forms should be completed and returned as soon as possible, but not later than May 29, 2017 to:

OneJax Institute
University of North Florida
1 UNF Drive
Building 53, Suite 2750
Jacksonville, Florida 32224
office (904) 620-1529 fax (904) 620-5604
www.onejax.org onejax.lane@unf.edu

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OneJax's Metrotown Institute of 2017

Please briefly answer the following questions in two or three sentences. There are no wrong answers.

Why do you want to participate in Metrotown Institute?

What are your biggest concerns about living in a world of very different people?

Name someone in your life who has taught you about friendship. Why did you select this person?
What did they teach you?

List 3 things that are special about you:

- 1)
- 2)
- 3)

If you had all the money, time, and resources you needed to make a difference in our world, what would you do?

When are you truly happiest?

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ACKNOWLEDGEMENT, INDEMNITY, WAIVER and RELEASE OF LIABILITY
FOR PARTICIPATION in a UNIVERSITY OF NORTH FLORIDA ACTIVITY

**THIS AFFECTS YOUR LEGAL RIGHTS.
PLEASE READ CAREFULLY BEFORE SIGNING BELOW.**

Participant: _____

Address: _____
Last First MI Apt: _____

City & State: _____ Zip: _____

Telephone: Home: _____ Cell: _____

I intend to participate in the event called _____ (“Activity”) to be conducted by _____ (“Sponsor/Organizer/Operator”) that is scheduled to take place on or about _____, 20____. The event consists of the following types of activities (i.e., - transportation, hiking, swimming, etc.)

I acknowledge that I must thoroughly read and understand the information contained in this Acknowledgement, Indemnity, Waiver and Release of Liability (“Release”) pertaining to the Activity and the possible risks and hazards that might result from participation in this Activity.

NOTE: If I am under eighteen (18) years of age, I understand that while I am bound by the provisions of this Release and must acknowledge and agree to its terms, I am not permitted to execute this Release or participate in this Activity without approval of my parent or legal guardian, who must execute this Release on my behalf.

1. I acknowledge and agree that I am required to act in a mature and responsible manner at all times during the Activity and further acknowledge and agree that I will be held responsible for my own behavior and must respect the property of the University of North Florida (“University”) and others.

2. I acknowledge and agree that I must observe all state and local laws and University regulations and policies, including those concerning alcohol/drug use and required student conduct. Information regarding applicable University regulations and policies are contained in The UNF Student Handbook which can be located online at http://www.unf.edu/deanofstudents/student_handbook.aspx. I further acknowledge and agree that in the event that I have any questions regarding the applicability of the University’s regulations and policies to the Activity, it is my responsibility to make any necessary inquiries to the Activity Sponsor/Organizer/Operator or to make any necessary inquiries to the University’s Office of Student Affairs. Additionally, I acknowledge and agree that I must observe and comply with the specific rules and conditions developed for participation in the Activity by its Sponsor/Organizer/Operator Initials: _____

3. I acknowledge and agree that it is my obligation to make any necessary inquiries to the Activity Sponsor/Organizer/Operator regarding my ability, physically or otherwise, to safely participate in the Activity and that, prior to executing this Release, I have been provided the opportunity to inquire and discuss the possible risks and hazards to me resulting from my participating in the Activity. Any questions I had regarding my ability to participate in the Activity have been answered to my satisfaction, and I have received sufficient information to make a sound and voluntary decision to participate in the Activity.

4. In exchange for the University allowing me to participate in the Activity, I give the University the right and permission to record my participation and appearance on videotape, audiotape, film, photography or any other medium and to use my name, likeness, voice and biographical information in connection with these recordings. The University may exhibit or distribute all or any part of these recordings for any educational or promotional purpose which the University and its employees deem appropriate. All such recordings shall be the University’s property.

5. **Please pay particular attention to paragraphs 5(a) through 5(c) regarding your risk liability:**

(a) In exchange for the Activity Sponsor/Organizer/Operator making arrangements for, permitting me to and assisting me in participating in the Activity, I hereby assume all risks of participation in the Activity. Risks include, but are not limited to, transportation risks, risks of participation in the various components of the Activity, and all risks related to any physical or other condition from which I might suffer. I acknowledge that the University and/or Activity Sponsor/Organizer/Operator does **not** provide personal accident/health insurance for me, and I assume personal and financial responsibility for any medical care and treatment I may require as the result of participating in the Activity.

(b) I acknowledge and agree that sponsor/organizer/operator will not provide medical personnel at the location of the Activity. I further acknowledge and agree that the Activity Sponsor/Organizer/Operator is granted permission to authorize emergency medical treatment for me, if necessary, and that such action by the Activity Sponsor/Organizer/Operator is subject to the terms of this Release.

(c) In exchange for the University and the Activity Sponsor/Organizer/Operator allowing me to participate in the Activity and having reviewed and agreed to all acknowledgements listed in paragraphs 1 through 5(b) of this Release as detailed above, I, on behalf of myself, spouse, family, heirs, beneficiaries, and personal representatives, agree to assume all the risks and responsibilities of participating in the Activity. I release and forever discharge and covenant not to sue the University of North Florida Board of Trustees, the Florida Board of Governors, and the State of Florida, their officers, agents, employees, and representatives, including the Activity Sponsor/Organizer/Operator ("Releasees") from and against any and all liability for any and all claims, demands, actions, causes of action of whatever kind or nature, costs and expenses of any nature, including attorneys' fees ("Claims") that I may have or that may hereafter accrue to me, arising out of or related to any harm, loss, damage or injury, including but not limited to suffering, death or property loss that may be sustained by me, whether caused by my action or negligence or the action or negligence of Releasees or third parties in connection with the Activity. I also agree not to sue Releasees in connection with any such harm, loss, damage, or injury. I agree to indemnify and hold Releasees harmless from and against all claims asserted against any of the Releasees by any entity based upon my participation in the Activity.

6. I acknowledge and agree that should any provision or aspect of this Release be found to be unenforceable, all remaining provisions of this Release will remain in full force and effect. Further, I acknowledge and agree that this Release shall be construed pursuant to the laws of the State of Florida and that the venue for any legal proceeding concerning this Release shall be in Jacksonville, Duval County, Florida.

I have read, understand, and acknowledge that through initialing each of the six (6) sections above in this two page Release, that I must comply with the information and directions and intend to be bound by the terms contained in this Release and I have voluntarily executed the Release.

Dated this _____ day of _____, 20_____.

Participant's Signature
(I certify that I am 18 years of age or older.)

Parent or Guardian's Signature
(If Participant is under 18 years of age.)