

Happening FAQs

So...what am I getting myself into?

At Happening, you can expect to play games, sing, pray, meet new people, make life-long friends, learn about God, and to feel Jesus' love for you in new, powerful, and unexpected ways. You can expect to be able to be exactly who you are!

What should I bring?

Appropriate clothing, linens (a towel, twin-sized sheets/sleeping bag and pillow), personal toiletry items, and a Christ-like attitude. If attending Happening in August, you might want to bring bug spray.

When is Happening?

July 29 - 31, 2011. Happening is held twice a year in January and July/August. The next Happening (#88) is slated for January 27 - 29, 2012.

Where is Happening?

Happening is held at Honeycreek, the Diocese of Georgia's Camp and Conference Center. The address is 299 Georgia Episcopal Center Rd., Waverly, GA, 31565, 912.265.9218. Please consult Google Maps or Mapquest for directions.

How much does it cost?

\$110. Checks are payable to "The Diocese of Georgia."

What if I can't afford it?

Scholarship assistance is *always* available, and a lack of money should *never* keep a young person from attending an event in the Diocese of Georgia. **Ask your parish or church for help first** (it might surprise you how generous they can be), then contact Canon Leigh Hall (information below) for further assistance.

Do I have to be Episcopalian to go to Happening?

No. While all are most welcome at Happening, our worship is decidedly Episcopalian (and therefore Christian) and is taken from our main worship book, *The Book of Common Prayer*, along with other supplementary materials.

How do I apply?

There are a few ways to apply. 1.) Fill out this form, have your parent and a priest/pastor sign it, and mail it with your registration fee to the address below. 2.) To use a credit card, apply online via www.edogy.org. 3.) Call Canon Leigh at 912.236.4279. You can also fax this form or scan and email it as well, but you'll need to mail your registration fee separately.

FOR MORE INFORMATION, VISIT WWW.EDOGY.ORG OR CONTACT
The Rev. Canon Leigh Hall | lhall@gaepiscopal.org | The Diocese of Georgia |
611 E. Bay St. | Savannah, GA 31401 | 912.236.4279 (main) | 912.236.2007 (fax)



THE EPISCOPAL DIOCESE OF GEORGIA Youth and Young Adults

Happening

The way life should be.



#87 | July 29 - 31, 2011
Honey Creek | 10th - 12th grade | \$110

Happening is a Christ-centered weekend that provides space and time for young people to encounter God's love in community.

PLEASE FILL OUT THIS FORM THOROUGHLY AND COMPLETELY.

Registration Information

Medical Information

PARTICIPANT'S NAME

DATE OF BIRTH

DOES THE PARTICIPANT HAVE ANY PHYSICAL LIMITATIONS WE SHOULD BE AWARE OF? IF SO, PLEASE USE THE SPACE BELOW TO LIST AND EXPLAIN.

ADDRESS

EMAIL ADDRESS

DOES THE PARTICIPANT HAVE ANY ALLERGIES, INCLUDING, BUT NOT LIMITED TO, FOOD, MEDICINE, OR INSECTS? IF SO, PLEASE USE THE SPACE BELOW TO LIST REACTION AND TREATMENT FOR EACH.

PARENT/GUARDIAN NAME

PARENT/GUARDIAN PHONE #

PARENT/GUARDIAN ADDRESS (IF DIFFERENT)

PRIEST/PASTOR

HOME CHURCH

DOES THE PARTICIPANT REQUIRE ANY REGULAR OR OCCASIONAL MEDICINES WHICH ARE TYPICALLY ADMINISTERED BY THE PARTICIPANT OR PARENT/GUARDIAN? YES _____ NO _____

GRADE

GENDER

T-SHIRT SIZE

IF YES, THE REQUIRED MEDICINES MUST BE PLACED IN A BAG ALONG WITH ADMINISTRATION INSTRUCTIONS, WITH THE PARTICIPANT'S NAME ON THE OUTSIDE.

THE EPISCOPAL DIOCESE OF GEORGIA HAS PERMISSION TO USE PHOTOS OF MY CHILD IN PROMOTIONAL MATERIALS. YES _____ NO _____

MY CHILD IS ALLOWED TO TAKE ACETAMINOPHEN (TYLENOL) OR IBUPROFEN (ADVIL) FOR MINOR ACHES AND PAINS AS ADMINISTERED BY AN ADULT AT HAPPENING. YES _____ NO _____

APPLICANT - COVENANT

While at Happening, I agree to abstain from the use of alcohol, tobacco, illegal substances, unauthorized prescription medications, and weapons. I will have no inappropriate physical contact with others, will refrain from sexual conduct, and will wear appropriate clothing at all times. I will not use my cell phone during this event and will fully participate and be on time. I will not belittle or humiliate others and will maintain a Christ-like attitude. I promise to abide by all Happening's rules and adult requests. I accept full authority of the weekend coordinators.

MEDICAL RELEASE

I give the above named child for whom I am legally responsible permission to attend Happening held at Honeycreek and sponsored by the Episcopal Diocese of Georgia. I agree to hold harmless all representatives of the Episcopal Diocese of Georgia in regard to accident or injury involving the above child at Happening. I grant permission for said child to be treated by trained medical personnel and agree to be responsible for all expenses incurred in the course of such treatment.

PARTICIPANT'S SIGNATURE/DATE

PARENT/GUARDIAN SIGNATURE/DATE

PARENT/GUARDIAN'S SIGNATURE/DATE

PRIEST/PASTOR MUST SIGN BELOW

My signature means that I am aware the above named person from my congregation is attending Happening. I will support this person on his/her spiritual journey.

INSURANCE CARRIER

PRIEST/PASTOR SIGNATURE/DATE

POLICY NUMBER