

Building & Scaring Schedules

Building Nights (6:30 pm – 9:30 pm)

| | | | |
|------------------------|-------------------------|-----------------------|------------------------|
| Tuesday July 14th | Wednesday July 15th | Thursday July 16th | |
| Tuesday July 21st | Wednesday July 22nd | Thursday July 23rd | |
| Saturday August 8th | Saturday August 22nd | Saturday Sept. 5th | Saturday Sept. 19th |

Scaring Nights (5:30 pm – 10:30 pm)

| | | |
|------------------------|--------------------------|------------------------|
| Friday Sept 25th | Saturday Sept. 26th | Sunday Sept. 27th |
| Friday October 2nd | Saturday October 3rd | Sunday October 4th |
| Friday October 9th | Saturday October 10th | Sunday October 11th |
| Friday October 16th | Saturday October 17th | Sunday October 18th |
| Friday October 23rd | Saturday October 24th | Sunday October 25th |
| Friday October 30th | Saturday October 31st | |

Rejoice In Hope Youth Center Haunted Labyrinth 2020



"Dear young people, do not bury your talents,
the gifts that God has given you!
Do not be afraid to dream of great things!"

- Pope Francis

Permission Form

Name _____ Gender (circle) M F

Address _____ City _____ ZIP _____

Youth Cell Phone: _____ Parent Cell Phone: _____

School _____ Grade (circle) 8 9 10 11 12 College

Month/Year of Birth _____ Church _____

** I give my son/daughter permission to volunteer at the Haunted Labyrinth at the Rejoice in Hope Youth Center. As parent and/or legal guardian, I remain legally responsible for any personal actions taken by my son/daughter. I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend the Roman Catholic Bishop of Providence, the Catholic Youth Organization (CYO) of the Diocese of Providence and the officers, directors, employees and agents, chaperones, or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the Roman Catholic Bishop of Providence, the Catholic Youth Organization (CYO) of the Diocese of Providence, its officers, and agents, and chaperones, or representative associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the Rejoice In Hope Youth Center a program of the Catholic Youth Organization (CYO) of the Diocese of Providence.

** I authorize the Haunted Labyrinth to use photographs and/or videos of my child for productions, publications, etc.

** In the event of an emergency, I grant permission for my child to be transported to a local hospital for treatment.

My child is allergic to: _____

My child has the following health conditions you should be aware of: _____

(Use additional sheets if necessary)

My child takes the following medications: _____

** I give permission for over-the-counter medications to be administered if necessary:

*Please **cross out** which of the following your child **cannot** receive:

Tylenol Ibuprofen Benadryl Tums

PARENT/GUARDIAN SIGNATURE:

Date: _____

Volunteer Service Guidelines

An Agency of the Diocese of Providence, 1 Cathedral Square, Providence, RI 02903
Rejoice in Hope Youth Center, 804 Dyer Avenue, Cranston, RI 02920– (401)942-6571

The Haunted Labyrinth is a community building event providing service opportunities for youth in the Diocese of Providence. This fundraiser operates through the generous service of volunteers who are at least in eighth grade as of September 2020.

Haunted Labyrinth will be adhering to the RIDOH COVID 19 guidelines

- Stay home if you are sick or at higher risk..
- Before entering the facility you must pass a symptom checklist. If you present with any symptoms, you will not be admitted.

Please Bring:

- **IDENTIFICATION:** a current school ID, a school schedule or a driver's license
- **FACE MASK AND BOTTLE OF WATER**
- You may choose to bring ear plugs to guard against loud noises.
- Do **NOT** bring any valuable items. There is no place to store them. We are not responsible for any lost or stolen items.

Building:

- Please arrive (at the front door) no earlier than 6:15PM, and no later than 6:30PM.
- Have your ride pick you up at 9:30PM! If you are leaving early, a parent or guardian must come in to pick you up.
- Please wear clothes that you don't mind getting paint on or getting ripped or snagged.
- No open-toed shoes are allowed. Please wear sneakers or work boots.

Scaring:

- Please arrive at the Rejoice in Hope Youth Center in Cranston (at the back door) no earlier than 5:15PM and no later than 5:30PM. Doors will open at 5:30 PM. Plan on being picked up (at the front door) no later than 10:30PM.
- **YOU MUST BE DRESSED IN BLACK.** Please dress in long pants and long-sleeved shirts! No open-toed shoes allowed! If you are not dressed appropriately, you *may* be asked to return another night when dressed properly. Do not bring any costumes, they will be supplied.
- There will be an adult Security person assigned to your area, who will check on you regularly.

What working at the Haunted Labyrinth will do for you:

- It will give you opportunities for fun, community building and prayer.
- It will broaden your friendships throughout the Diocese.
- It will help you develop a better understanding of discipleship and service to others.
- It will expect that you work and act according to the example of Christ.

Should you have any questions, you may call the Rejoice in Hope Youth Center at 942-6571 or E-mail us at rejoiceinhope@dioceseofprovidence.org

Thank you for your willingness to volunteer at the Haunted Labyrinth!