



FEDERATION  
OF BC YOUTH  
IN CARE  
NETWORKS

BY COMING TOGETHER, WE'RE NOT ALONE!

# YOUTH RETREAT (SCM)

## Adult Support Application Package

*The Federation of BC Youth in Care Networks (FBCYICN, or the Fed) is a youth-driven, provincial, non-profit organization dedicated to improving the lives of young people in and from care in BC between the ages of 14 and 24.*

**USE THE HANDY CHECKLIST TO MAKE SURE YOU'RE SUBMITTING A COMPLETE APPLICATION!**

- Read and signed the What to Expect page
- Filled out and signed the Event Registration Form
- Filled out and signed the Media Consent Form
- Filled out and signed the camp's waiver form
- Filled out and signed SCM Supportive Adult Volunteer Roles and Responsibilities Form
- Attached valid Vulnerable Sector Criminal Record Check
- Read and signed Member and Adult Support Relationship Policy
- Attached a drivers abstract, if applicable

*Send your completed application package by **February 24, 2020 by 4 PM** to:*

**Email** [steve.smith@fbcyicn.ca](mailto:steve.smith@fbcyicn.ca)

**Fax** 604-527-7764

**Mail** 500-625 Agnes St., New Westminster, BC V3M 5Y4

*If you have any questions about the application package or how to submit it, please email [steve.smith@fbcyicn.ca](mailto:steve.smith@fbcyicn.ca) or call him at 604-527-7762 ext. 112.*

# WHAT TO EXPECT

Our retreats bring youth in and from care from all across the province together to learn life skills, have fun, build lasting friendships, direct the work of the organization, contribute to government consultations, and build a provincial community. Our camps create a fun, safe environment where you can connect with other young people who are building a provincial network for youth in and from care.

Adults play a crucial role at the SCM. Not only are you viewed as a role model, but your presence and energy help to establish a safe and comfortable space for participants.

Some things we ask you to consider as an adult support are:

- When participating in events it is expected that all participants will behave in ways that put safety first
- Role-modelling what we'd like to see from young people; so being present and actively listening to what young people have to say
- Having fun and participating (in more of a limited way) so we're leading by example but also providing space for young people
- Helping out (see Roles and Responsibilities)
- Sharing information about cool youth opportunities you might be aware of
- Check-in with young people, especially those that might seem to be by themselves or might seem out of sorts
- Helping to uphold our Values Code, which our guidelines young people created that we all have to follow in order to keep the space safe, welcoming, and inclusive

As an adult support, some things we should keep in mind to avoid doing:

- Dominating discussions and placing judgement on what young people say or do
- While it's important to be youthful, approachable, and friendly, we should establish good, ethical boundaries and not try to be their peer or 'friend'
- Also important to not only connect with the young people that you brought or to only hang out with adults

## *Time Commitment*

- Entire event with hours varying depending on needs of youth
- Up to 12 hours a day depending on your assigned role

## *Necessary Skills*

- Strong youth engagement skills
- Conflict resolution skills
- Ability to work with little direction
- Understanding of trauma-informed care

## *Training Orientation*

- Must participate in teleconference orientation to go over roles and expectations

## Adult Support Event Subsidy

**We are happy to provide a full subsidy covering all costs related to travel, accomodation, meals, and registration fees planned and organized by the Federation. If you want to discuss a subsidy, please email [info@fbcyicn.ca](mailto:info@fbcyicn.ca).**



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# Event Registration Form

## Adult Support

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### Event Information

EVENT NAME \_\_\_\_\_ EVENT DATE(S) \_\_\_\_\_

START TIME \_\_\_\_\_ END TIME \_\_\_\_\_ LOCATION \_\_\_\_\_

**PRIVACY:** The personal information collected with this form is used by the Federation of BC Youth in Care Networks (the Fed) to ensure the safety and well-being of all participants at the Fed event. The contact information you provide is also used to send updates and information to you throughout the planning process. This information will not be shared with individuals or other organizations. For more information, check the website or contact the office at [info@fbcyicn.ca](mailto:info@fbcyicn.ca), 604.527.7762 or 1.800.55.8055 (toll-free).

### Contact Information

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

BIRTH DATE (MM/DD/YYYY) \_\_\_\_\_ AGE \_\_\_\_\_ MY GENDER IS \_\_\_\_\_

MY PRONOUNS ARE (EX. SHE/HER/HERS) \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_ PHONE (2) \_\_\_\_\_ EMAIL \_\_\_\_\_

What's the best way for us to contact you?

PHONE  EMAIL  FACEBOOK  OTHER (PLEASE SPECIFY) \_\_\_\_\_

### Emergency Contact Information

The person named below must be available 24 hours a day for the entire event in case of emergency, and must be over 19.

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

RELATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_ PHONE (2) \_\_\_\_\_ EMAIL \_\_\_\_\_

## Travel Details

- You will arrive at the event independently.
- You will need transportation to get to and from the event location.

*Please note: You may be required to get to the Fed's office to meet up with your required transportation.*

## Criminal Record Check

Please attach a valid Vulnerable Sector Criminal Record Check with your application. If your CRC is not attached your application will be considered incomplete.

## Health Information

This information is collected to ensure the safety, health and well-being of all participants at the Fed event. It is important that all the questions are answered honestly and completely.

**Do you have any allergies, injuries or health conditions that may affect your participation?**

**Do you have any dietary restrictions (personal preferences do not count)?**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> <b>NONE</b>  |  |  |
| <input type="checkbox"/> <b>VEGAN</b><br>No animal products                     | <input type="checkbox"/> <b>NO PORK</b>    | <input type="checkbox"/> <b>OTHER (PLEASE SPECIFY):</b>  |
| <input type="checkbox"/> <b>VEGETARIAN</b><br>No meat                           | <input type="checkbox"/> <b>NO POULTRY</b> | _____  |
| <input type="checkbox"/> <b>LACTO-OVO VEGETARIAN</b><br>Will eat dairy and eggs | <input type="checkbox"/> <b>NO SEAFOOD</b> | <i>Note: If there is nothing marked down on the registration form, you will not be provided a special dietary meal at the event.</i> |
| <input type="checkbox"/> <b>NO RED MEAT</b>                                     | <input type="checkbox"/> <b>NO DAIRY</b>   |  |
|   | <input type="checkbox"/> <b>NO NUTS</b>    |  |

**SIGNATURE** \_\_\_\_\_ **DATE SIGNED (MM/DD/YYYY)** \_\_\_\_\_



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# Media Consent Form

During events and activities hosted by the Federation of BC Youth in Care Networks, such as Steering Committee Meetings, Holiday Parties, Awards Ceremonies, Special Events, etc., we take photos/videos/audio recordings that include young people, alumni, and adults. We use these photos/videos/audio recordings in our Power Pages magazine, on our website, in reports, and sometimes in information sheets and brochures. It is Fed policy that names, ages or addresses are not used to identify youth under the age of 19 in these photos/videos/audio recordings. Social workers, please note that this is in line with MCFD policy for children and youth in care.

*Consent: I hereby give the Federation of BC Youth in Care Networks, its employees and those acting with its authorization the right and permission to use and/or publish photos/videos/audio recordings of me as outlined below. I hereby waive any right to inspect or approve the finished or publicized media. Signing this form will be deemed as consent with the above. A parent or guardian must sign this release form if the individual photographed/video is under the age of 19 years. If the youth/participant are under the age of 19 both signatures of participant and guardian must be signed.*

*I hereby authorize the Federation of BC Youth in Care Networks to allow photos/videos/audio recordings to be taken or used for the following (select yes or no):*

- YES       NO      Power Pages & magazines (including covers)
- YES       NO      Reports & info sheets (including covers)
- YES       NO      Promotional materials or videos (brochures, posters, presentations, ads, etc.)
- YES       NO      FBCYICN website
- YES       NO      FBCYICN social media (Facebook, Instagram, Twitter, YouTube)

*Note: We will do our best to ensure youth's privacy is respected but we cannot control other youth posting photos/videos/audio recordings to social media.*

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

BIRTH DATE (MM/DD/YYYY) \_\_\_\_\_ AGE \_\_\_\_\_ MY GENDER IS \_\_\_\_\_

MY PRONOUNS ARE (EX. SHE/HER/HERS) \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

PHONE \_\_\_\_\_ PHONE (2) \_\_\_\_\_ EMAIL \_\_\_\_\_

YOUTH SIGNATURE \_\_\_\_\_ DATE SIGNED (MM/DD/YYYY) \_\_\_\_\_

GUARDIAN SIGNATURE \_\_\_\_\_ DATE SIGNED (MM/DD/YYYY) \_\_\_\_\_

If consent is not given, please indicate why:

- Court-ordered restriction
- Immediate safety concern
- Other (please specify): \_\_\_\_\_

*Please note that if you have given consent and want it changed, you must notify us immediately.*

Phone: 604-527-7762  
Email: info@fbcyicn.ca



FOR CHILDREN

*Out here we raise spirits.*

### Acknowledgement of Risk and Release of Liability

**For participants Under the Age of Majority in the province or Territory in which activities are provided by the Zajac Ranch for Children.**

**Every person must read and understand this waiver before participating in Zajac Ranch Programs**

**Initial Each Item Below after Reading and Understanding each item;**

\_\_\_\_\_. I am aware that there are inherent dangers, hazards and risks associated with activities that include but are not limited to Equine activities, High Ropes/Low Ropes course, Rock Climbing Wall, Boating and Swimming.

\_\_\_\_\_ 2. I am aware that the "Risks" of such activities mean those dangerous conditions which are associated with participation and observing Zajac Ranch activities. Those Risks include but are not limited to:

- A) the propensity of any equine to behave in ways that may result in injury or harm to persons on or around them and to potentially collide with, bite, or kick other animals, people or objects;
- B) the unpredictability of equines reaction to such things as sounds, sudden movement, vibrations, unfamiliar objects, persons or other animals and hazards such as subsurface objects;
- C) Cuts and abrasions resulting from skin contact with the climbing wall , high ropes course, swimming dock, boats or any other surfaces;
- D) Rope abrasions, entanglement and other injuries resulting from activities on the course such as, but is not limited to climbing, lowering on ropes, spotting, lifting, belaying or rescue techniques;
- E) Failure of ropes, harnesses or climbing holds or other equipment
- F) Failure to follow safety procedures set out by the Equestrian Director, High Ropes instructor, Life Guards and all other trained staff

\_\_\_\_\_3 In entering into this agreement, I/we am/are not relying on any oral, written or visual representation or statements by Zajac Ranch , its officers, employees, guides/ instructors, agents of representatives (collectively the staff) or any other inducement or coercion to go on the program only of my own free will.

\_\_\_\_\_4. I/we agree to participate and follow the rules and directions of the Zajac Ranch instructors with regards to rules and safety requirements.

\_\_\_\_\_5. I authorize the Zajac Ranch Director, Medical Director or His/her appointee, in the event of an accident or illness affecting my child to authorize on my behalf all procedures that include but are not limited to; admission into the hospital or all necessary treatment therein that may be deemed necessary for my child's care and well being. Such action will only be taken when immediate contact cannot be made with emergency contact. It is understood that Zajac Ranch and its staff are not responsible for the cost of medical care or any other associated expenses.

\_\_\_\_\_ 6. I confirm that I have had sufficient time to read and understand this waiver in its entirety. I understand that this agreement represents the entire agreement between myself as a Parent/Guardian and the Zajac Ranch for Children. I am at an age of legal consent. I agree that the agreement will be binding upon out heirs, next of kin, executors, administrators and successors signing it and I agree that this agreement shall be governed in all respects by and interpreted in accordance with the laws of Canada.

Do you have any Existing Health, mental or physical condition (s) that precludes climbing or swimming?    Yes                      No

**Please Print Clearly**

Participants Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

\_\_\_\_\_ Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

(Signature of Parent/Guardian)



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# SCM Adult Support Volunteer Roles & Responsibilities

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*In your role as an adult support you may be required to:*

- Be the adult support person for any young people that have travelled with you
- Positive role model and support for participants (i.e. make sure participants feel safe, welcomed and engaged with others)
- Organize and help with camp clean ups (i.e. after meals)
- Help to keep participants organized and on time (i.e. directing participants to workshops, rounding up folks from breaks/mealtimes, etc.)
- Cabin wake-ups
- Cabin checks throughout the day
- Head counts throughout the day
- Consultation/workshop supports (i.e. setting up space, note-taking)
- Setting up evening activities and special events
- Coordinate and facilitate evening and free time activities
- Assistant first aider (must provide valid first aid certification)
- Drive youth to airport/ferry if they choose/need to leave early
- Drive youth with non-emergency health concerns to hospital/doctor

Please identify additional skills, interests, strengths and experiences you can offer as a supportive adult at the event (i.e. Class 5 license, First Aid, non-violent crisis intervention training, naloxone training, designated support for Indigenous and/or LGBTQ2S youth, etc.).

Are there any roles that you feel you would not be comfortable doing as an adult support?

SIGNATURE \_\_\_\_\_ DATE SIGNED (MM/DD/YYYY) \_\_\_\_\_



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# Member & Adult Support Relationship Policy

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## *Purpose*

To minimize risk and ensure safety for youth members, adult supports and the FBCYICN.

## *General Policy*

Adult supports (volunteer outside agency or Fed Alumni 25+) must declare any personal relationships with young people who are involved with, or key to our organization and are not permitted to enter in any romantic and/or sexual relationships with a youth member while they are an adult support with FBCYICN. Adult supports are also encouraged to not have any personal contact with members outside FBCYICN events and activities.

## *Policy and Procedure Details*

- Adult supports must declare any personal relationships with young people who are involved with or key to our organization at the beginning of the volunteer position.
- Adult supports must follow FBCYICN Conflict of Interest guidelines with all declared personal relationships.
- While volunteering with FBCYICN adult supports cannot enter any romantic and/or sexual relationships with members.
- Adult supports should not give out any personal phone numbers or e-mail addresses to members.
- Adult supports should not add members to their personal social media accounts, but can create separate, professional accounts for either their FBCYICN work and/or professional work outside FBCYICN.
- Adult supports are encouraged to not have any personal contact with members outside FBCYICN events and activities. If an adult support and member would like to be in contact outside of FBCYICN approval/notice must be given by supervising staff or the Executive Director. The following are reasons that may be approved:
  - › Working with the member in another professional capacity
  - › Developing a mentorship relationship with the member
  - › Providing resources to a member

SIGNATURE \_\_\_\_\_

DATE SIGNED (MM/DD/YYYY) \_\_\_\_\_





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# VALUES CODE

The Fed Values Code is an evolving document that is a collection of values that all youth members, participants, staff and adult supports are accountable to when attending or participating in Fed-run programs, events, outings, and social media. Disregard for the Values Code will have consequences that may include removal from an event or activity and future events or activities. The Fed staff are committed to ensuring that Fed events are safe and comfortable for all youth to participate in.



## THE FED VALUES

### Acceptance & Tolerance

Accept people for who and what they are and their experiences. Recognize that even if we disagree, we can still have positive and meaningful connections.



## THE FED VALUES

### Honesty

Lying and stealing create an adverse and unsafe environment. Please help maintain the positivity of Fed events by employing honesty. Always feel free to express your honest opinions or concerns.



## THE FED VALUES

### Respect for the Shared Space & Land We Use

The Fed acknowledges that many of our events take place on unceded territories in BC. We will honor the land we use by leaving it as we found it, and respecting others that use the space.

Icons designed by JT and Liana K.



## THE FED VALUES

### Kindness & Consideration

Respect inclusive and preferred pronouns and avoid the use of derogatory language. Express yourself with respectful words. Hate speech, offensive language and discrimination of any kind (gender, race, sexuality, age, religion, ability, size, etc.) is not tolerated and will result in one warning, followed by removal from the Fed event or space if the behaviour continues.

Examples of derogatory language include, "That's so gay" (offensive to the LGBTQ2S community), "You guys" (offensive to gender non-binary and gender non-conforming youth), "That's crazy" (offensive to those with mental health struggles), etc.



## THE FED VALUES

### Gratitude

If you appreciate someone for their words or actions, let them know!



## THE FED VALUES

### Safety & Privacy

Fed events are safe spaces for all. Weapons and violent or aggressive words, actions or threats will not be tolerated. We respect everyone's right to privacy. Youth cannot enter rooms or cabins to which they are not assigned.



## THE FED VALUES

### Participation & Cooperation

While participating in a Fed event, engage in the ways you are able to, stay on site for the duration of the event, listen to staff and adult support instructions and ask for a break or space if you need it.



## THE FED VALUES

### Discretion

Respect the boundaries, privacy and personal space of others. Sexual contact is not appropriate while at Fed events. Physical contact and taking photos of someone can make them uncomfortable; let's minimize this by asking before touching each other and asking before taking photos.



## THE FED VALUES

### Spaces Free of Prohibited Substances

Leave alcohol and illicit drugs at home and sign in all medication to staff. Be mindful that there are folks in recovery, and they should not have to be worried about exposure and relapsing in this environment. Be mindful that there are underage youth at Fed events. The use of prohibited drugs or misuse of prescription drugs will result in immediate removal from the Fed event with a follow up meeting to decide participation in future Fed events. Please note that while attending Fed events, no members, alumni, staff, adult supports or board members can enter age exclusionary establishments like bars and clubs.

Examples of prohibited use or misuse are being in possession of marijuana/alcohol, dosage abuse, selling or sharing prescription medication, selling cigarettes, consuming energy drinks, etc.

CONFIDENTIAL

## THE FED VALUES

### Confidentiality

The Fed respects folks' confidentiality and consent. Be mindful when taking photos and sharing stories at Fed events. Not everyone consents to having their photos and/or stories shared publicly (i.e. social media). Our goal is to create an environment where youth feel empowered to share their stories without fear of it being shared without their consent.



## THE FED VALUES

### Unity

We come together to make connections and great memories. Make an effort to include everyone and empower one another to do our personal best. Be willing to meet people where they are at. Work to understand that our individual experiences and trauma impact us all differently.