



World Youth Day Krakow 2016

Ukrainian Catholic Pilgrimage

Blessed are the merciful; for they shall obtain mercy (Matthew 5:7)
 July 12-14th in Lviv, Ukraine
 July 15th-17th in Zarvanytsia, Ukraine
 July 18th-24th for Days of the Eparchy in Przemysl, Poland.
 July 25th-31st for World Youth Day week in Krakow, Poland

Approximate cost \$3800-\$4200 (includes accommodations, flights, 2/3 of your meals, tours costs, WYD passes and any extra costs)
 Registration and non-refundable Deposit by December 1st- \$550
 Cheques can be made out to respective Eparchies.

Registration Form:

Name:
Date of Birth:
Address:
City/Town:
Province:
Postal Code:
Home Phone:
Work Phone:
Cellphone:
Email:
Parish:
Emergency Contact: (name/address/ phone numbers, relationship to you)
Hospitalization Number:
Any Medical Concerns (medications, health concerns, medical conditions, allergies, etc.)
Passport Number: Name: (as it appears on passport)

Your help in completing the following questions will enable the Planning Team to create a pilgrimage experience that will best meet the needs of all pilgrims:

1. Circle which Liturgy do you prefer to attend – English, Ukrainian, bilingual?
2. Please list any previous travel / pilgrimage experiences you have had:
3. Please describe your current level of involvement in church / spiritual activities:
4. Are you interested in taking on a leadership role for the pilgrimage (leading ice breakers, music ministry, organizing/leading small groups, creating promotional materials, organizing fundraisers, or any other ways you can share your gifts)? If yes, in what way?
5. What areas of spirituality, religion, faith or the Church are you interested in learning more about or experiencing in a deeper way?
6. What is your biggest hope for your pilgrimage experience to WYD 16, Krakow?
7. What are your expectations for this pilgrimage? What are your expectations of the leaders of this pilgrimage?
8. Please provide the name and phone number of a pastoral reference (priest, chaplain, youth group leader, teacher, etc.) who is able to affirm your readiness to participate in this pilgrimage.

CURRENT MEDICAL INFORMATION:

1. Date of last tetanus immunization:

2. If you wear or carry a medic alert bracelet, neck chain or card: Please specify what is written on it:

First aid procedures in case of incident:

3. If you are allergic to any drugs, foods, and/or medication, please specify:

First aid procedures in case of incident:

4. If you take any prescription drugs, please specify:

Provide details:

5. What medication(s) will you have with you during the trip?

Who should administer the Medication?

6. Specify any other physical limitations you have that may affect your full participation with activities:

Authorization Waiver

1. Assumption of Risk: The undersigned understands that there are inherent risks, both anticipated and unanticipated, associated with participation in the CUCP WYD, which participation includes, but is not limited to, participation in events, transportation, lodging, food, and activities related to and in connection with the CUCP WYD. These risks may include, but are not limited to, damage, loss or injury to person and property. The undersigned agrees to assume these risks, whether known or unknown to the undersigned.

2. Release: The undersigned does hereby release, forever discharge and agree to hold harmless the Ukrainian Catholic Episcopal Corporations of Toronto & Eastern Canada, Edmonton, Saskatoon, New Westminster and the Archeparchy of Winnipeg, and its heirs, legal representatives, assigns, members, directors, employees, and agents (collectively, the 'Eparchy'), from and against any and all actions, causes actions, damages, claims, demands, liability, and expenses of any nature and kind whatsoever which the undersigned ever had, now has or which the undersigned, or his or her heirs, legal representatives or assigns may have against the Eparchy by reason of, or arising out of, the participation in the CUCP WYD, which participation includes, but is not limited to, participation in events, transportation, lodging, food, and activities related to and in connection with the CUCP WYD, and personal injury, sickness, death, or damage of any nature and kind whatsoever which may be incurred or suffered by the undersigned in connection with the CUCP WYD (collectively, a 'Claim');

3. Indemnity: The undersigned does hereby agree to indemnify and hold harmless the Eparchy from and against any Claim which may be brought against the Eparchy by or on behalf of the undersigned as a result of the negligent, wilful, or intentional acts of the undersigned;

4. Permission re Medical Attention: The undersigned does hereby authorize and permit the Eparchy, the CUCP WYD, producers, sponsors, organizers, and/or assigns to furnish all necessary transportation, food, and lodging for the undersigned, and where deemed necessary by the Eparchy in its sole discretion, to seek medical attention and to authorize medical treatment, including, but not limited to, emergency surgery, the costs of which medical treatment shall be borne entirely by the undersigned:

5. Acknowledgement and Agreement: The undersigned has read the foregoing provisions and acknowledges full understanding of them;

6. Consent: I have read the foregoing provisions and acknowledge full understanding of them. I consent to participating in the CUCP WYD as described above, and I fully agree to the above and forever waive any Claim as defined above.

7. Insurance: The Eparchy does not provide any accidental death, disability, dismemberment, and medical/dental expenses insurance on behalf of the students participating in the activity

Signature of participant (over 18) or parent/guardian

Name of Participant (Printed)

Date

I acknowledge that while participating in the CUCP WYD or activities related to or in connection with the CUCP WYD, **I (or my child if under 18 at time of signing) may be photographed and/or recorded**, and I authorize and permit my (child's) photo, video, or film likeness to be used for any legitimate purpose by the Eparchy, the CUCP WYD, producers, sponsors, organizers, and/or assigns.

Yes

No

T-Shirt size S

M

L

XL

XXL

XXXL

Payment Information

First deposit of \$550 due on December 1, 2015.
Please send the first 2 pages and payment to:

Sarah Buchko (Saskatoon):

Ukrainian Catholic Eparchy of Saskatoon 214
Avenue M South, Saskatoon SK, Canada S7M
2K4 Office: 306-244-7720

Email: uwitness2youth@gmail.com

Make check to: Eparchy of Saskatoon

Millie Schietzsch (Edmonton):

Ukrainian Catholic Eparchy of Edmonton 9645
-108 Avenue, Edmonton, Alberta, Canada T5H
1A3 Office: 780-426-

4176 Email: youth@edmontoneparchy.com

Make check to: Edmonton Eparchy

Larissa Samborsky (Toronto):

Ukrainian Catholic Eparchy of Toronto, 2 Brockmount
Court, Toronto, Ontario, Canada M9B 5Z9

Phone – 416 – 721- 234 Email –

ontariocucp@gmail.com

Mykhailo Ozorovych (BC):

Please mail BC
registration forms to Millie Schietzsch in
Edmonton

Tamara Lisowski (Winnipeg):

Please mail MB
registration forms to Millie Schietzsch in
Edmonton

**For more information, please go
to <http://cucp.ca/wyd2016/>**

Passport Adult Application (16 years of age and older)

Step 1: Complete the [Adult General Passport Application](#)

To save time, complete the form on your
computer and then print it.

- Sign each page.
- Include the payment information (if
paying by credit card).

Step 2: Include with the application:

- [Proof of Canadian citizenship](#) (original
only);
 - A [document to support identity](#);
 - Two (2) identical passport [photos](#) (one
signed by the [guarantor](#)); and
 - The required [fees](#).
- Plus**, extra documents (if applicable):
- Any **still valid** Canadian travel
document previously issued in
your name.
 - If you have [changed your name](#).
 - If you are replacing a [lost, stolen or
damaged passport](#).

submitted by mail or at a [receiving
agent](#)).

Step 3: Next, have the [guarantor](#):

- Complete and sign the application
form;
- Sign one of the photos;; and
- Sign a copy of the identity document (if
applicable).

Step 4: **Submit** the application:

- [In person](#); or
- [By mail](#).

Urgent request If you plan to travel
within the next 20 business days,
apply in person at a [Passport Canada
office](#) (You may pay an extra fee to
[expedite processing](#)).

Application form can be found on
www.passportcanada@gc.ca

PRAYER

WYD KRAKOW 2016

"God, merciful Father,
in your Son, Jesus Christ, you have revealed your love
and poured it out upon us in the Holy Spirit, the Comforter,
We entrust to you today the destiny
of the world and of every man and woman".
We entrust to you in a special way
young people of every language, people and nation:
guide and protect them as they walk
the complex paths of the world today
and give them the grace to reap abundant fruits
from their experience of the Krakow World Youth Day.

Heavenly Father,
grant that we may bear witness to your mercy.
Teach us how to convey the faith to those in doubt,
hope to those who are discouraged,
love to those who feel indifferent,
forgiveness to those who have done wrong
and joy to those who are unhappy.
Allow the spark of merciful love
that you have enkindled within us
become a fire that can transform hearts
and renew the face of the earth.

Mary, Mother of Mercy, pray for us
Saint John Paul II, pray for us
Saint Faustina, pray for us



CUCP
Krakow
WYD 2016