



Group Leader Forms
2023

Important Dates & Deadlines

November 29th – 12:00 pm (noon) EST – Early Bird Registration

- \$50 per registration Non-Refundable/Non-Transferable Deposits are due within 2 weeks of registration date
- Early Bird Registration Payment Options: Check, Money Order, or Bill.com Electronic Check
- Unable to drop/release/cancel any Early Bird Registrations
- Registered groups may add additional Early Bird Registrations up until January 16th

January 17th – Regular Registration

- \$50 per registration Non-Refundable/Non-Transferable Deposits are due within 2 weeks of registration date
- Regular Registration Payment Options: Check, Money Order, or Bill.com Electronic Check
- Able to drop/release/cancel any Regular Registrations prior to May 19th (\$50 non-refundable/non-transferable deposit still due for all Regular Registration – No refunds checks will be issued)
- Registered groups may add Regular Registrations up until May 19th

May 20th – Late Registration

- Full payment of \$230 due within 48 business hours of receiving digital invoice
- Late Registration Payment Options: Overnighted Check, Overnighted Money Order, Major Credit Card (additional fees applied), or ACH Bank Transfer
- Unable to drop/release/cancel any Late Registrations
- Registered groups may add Late Registrations up until when the conference sells out or up until the day of the conference

June 2nd – Group Leader & Adult Verification Form and T-Shirt Size Order Form Due

- Signed and Sealed Adult Verification Form Due with ALL Adult Chaperones and Young Adults listed and cleared; a \$150 late fee may be charged if this form is received after the date listed above
- If you pre-ordered T-Shirts or Theme Bags, please complete the T-Shirt Size Order Form

June 16th – Final Payments Due

- Final payment must be received (not just postmarked) by end of business day. If paying by Check/Money Order, please plan accordingly
 - The following day a 10% late fee will be applied to any outstanding balances.

June 16th – Hotel Room Assignment List Due and Last Day to Book Hotel Rooms

- Room Assignment List MUST be submitted to grouppreservations@rosenhotels.com
 - Confirm Payment Method with Rosen Shingle Creek Group Housing (Credit Card, Check or Money Order)
 - Submit the Room Assignment Form – provided by grouppreservations@rosenhotels.com
 - Submit your Parish Tax Exempt Form
- Hotel Rooms may be booked after this date depending on hotel room availability, the Steubenville Florida Room Rate of \$152 per night, per room is not guaranteed after this date

July 11th by 12:00 pm (noon) EST - ALL Registrations Completed in the Group Leader Portal

- Online Registration/Liability Releases should be completed online for all attendees by this date and time
 - Group Leader, Chaperones, Youth, and Youth Adult Group Assistants need to be listed within the Group Leader Portal
- A \$150 late fee may be charged if any Online Registration/Liability Releases are missing within your Group Leader Portal
 - If you are unable to fill all your spots, please contact the Conference Office to ensure this fee is not applied

Group Leader and Adult Verification Forms

The safety of the youth is our number one priority. The Steubenville Florida Conference Office works closely with each Diocese in Florida to ensure that all group leaders and chaperones attending the conference have completed the Safe Environment Requirements in accordance of the policies under the "Charter for the Protection of Children and Young People."

Each form below is specific to one of the seven (arch)dioceses in the state of Florida and one for out-of-state groups.

Submit the proper form to your home diocesan contact. **DO NOT send this entire packet to your Diocesan Contact, they will NOT process your form.**

Diocesan Contacts

Diocese of Orlando

Signed and Sealed by your Parish Pastor

Archdiocese of Miami

Stephen Colella
Cabinet Secretary of Parish Life
Phone: 305-762-1126
Email: scolella@theadom.org

Diocese of Palm Beach

Kathy Casey
Diocese of Palm Beach Safe Environment Office
Phone: 561-775-9530
Email: kcasey@diocesepb.org

Diocese of Pensacola/Tallahassee

Jeanne M. Blake
Office of Human Resource and Safe Environment
Phone: [850-435-3570](tel:850-435-3570)
Email: blakej@ptdiocese.org

Diocese of St. Augustine

Norma Velez de Garcia
Diocese of St. Augustine Youth and Young Adult
Ministry
Phone: 904-262-3200 ext. 108
Email: ngarcia@dosafli.com

Diocese of St. Petersburg

Kim Sbarra
Safe Environment Office
Phone: 727-344-1611 ext. 5303
Email: ks@dosp.org

Diocese of Venice

Cara Smith
Diocese of Venice Background Screening
Coordinator
Phone: 941-441-1104
Email: Smith@dioceseofvenice.org

Out of Florida Diocese

Signed and Sealed by your home Diocesan Office
(last form)



As Pastor of _____ Church/Parish in the Diocese of **Orlando**, I hereby notify Catholic Servant Ministries, Inc that each adult listed below has been background checked and cleared in accordance with the policies of the Diocese under the "Charter for the Protection of Children and Young People" as set forth by the United States Conference of Catholic Bishops. I understand that no adult will be permitted to attend as a volunteer or participate that has not been cleared by their home diocese and is listed on this declaration.

Parish/Group Name: _____

#	Full Legal Name (Must Match Online Registration)	Group Leader, Chaperone, Young Adult Group Assistant, Seminarian, Religious Brother/Sister	Date of Fingerprinting (Completed by Church Office ONLY)
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Number of Adults Verifying

Signature of Pastor

Date Verified and Signed

(PARISH SEAL)



As Archbishop/Vicar General/Chancellor of the Archdiocese of **Miami**, I hereby notify Catholic Servant Ministries, Inc that each adult listed below has been background checked and cleared in accordance with the policies of the Diocese under the "Charter for the Protection of Children and Young People" as set forth by the United States Conference of Catholic Bishops. I understand that no adult will be permitted to attend as a volunteer or participate that has not been cleared by their home diocese and is listed on this declaration.

Parish/Group Name: _____

#	Full Legal Name (Must Match Online Registration)	Group Leader, Chaperone, Young Adult Group Assistant, Seminarist, Religious Brother/Sister	Date of Fingerprinting (Completed by Archdiocesan Office ONLY)	Date of PGC (Completed by Archdiocesan Office ONLY)	VIRTUS Report Submitted (Completed by Archdiocesan Office ONLY)
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Number of Adults Verifying

Signature of Archbishop/
Vicar General/Chancellor

Date Verified and Signed

(DIOCESAN SEAL)



As Bishop/Vicar General/Chancellor/Vice Chancellor of the Diocese of **Palm Beach**, I hereby notify Catholic Servant Ministries, Inc that each adult listed below has been background checked and cleared in accordance with the policies of the Diocese under the "Charter for the Protection of Children and Young People" as set forth by the United States Conference of Catholic Bishops. I understand that no adult will be permitted to attend as a volunteer or participate that has not been cleared by their home diocese and is listed on this declaration.

Parish/Group Name: _____

#	Full Legal Name (Must Match Online Registration)	Group Leader, Chaperone, Young Adult Group Assistant, Seminarian, Religious Brother/Sister	Date of Background Check (Completed by Diocesan Office ONLY)	Date of PGC (Completed by Diocesan Office ONLY)
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Number of Adults Verifying

Signature of Bishop/Vicar General/
Chancellor/Vice Chancellor

Date Verified and Signed

(DIOCESAN SEAL)



STEUBENVILLE
CONFERENCE

Group Leader and Adult
2023 Verification Form
Diocese of Pensacola/Tallahassee

As Bishop/Vicar General/Chancellor/Vice Chancellor of the Diocese of **Pensacola/Tallahassee**, I hereby notify Catholic Servant Ministries, Inc that each adult listed below has been background checked and cleared in accordance with the policies of the Diocese under the "Charter for the Protection of Children and Young People" as set forth by the United States Conference of Catholic Bishops. I understand that no adult will be permitted to attend as a volunteer or participate that has not been cleared by their home diocese and is listed on this declaration.

Parish/Group Name: _____

#	Full Legal Name (Must Match Online Registration)	Group Leader, Chaperone, Young Adult Group Assistant, Seminarist, Religious Brother/Sister	Date of Background Check (Completed by Diocesan Office ONLY)	Date of PGC (Completed by Diocesan Office ONLY)
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Number of Adults Verifying

Signature of Bishop/Vicar General/
Chancellor/Vice Chancellor

Date Verified and Signed

(DIOCESAN SEAL)





STEUBENVILLE
C O N F E R E N C E S

Group Leader and Adult
2023 Verification Form
Diocese of St. Augustine

As Bishop/Vicar General/Chancellor/Vice Chancellor of the Diocese of **St. Augustine**, I hereby notify Catholic Servant Ministries, Inc that each adult listed below has been background checked and cleared in accordance with the policies of the Diocese under the "Charter for the Protection of Children and Young People" as set forth by the United States Conference of Catholic Bishops. I understand that no adult will be permitted to attend as a volunteer or participate that has not been cleared by their home diocese and is listed on this declaration.

Parish/Group Name: _____

#	Full Legal Name (Must Match Online Registration)	Group Leader, Chaperone, Young Adult Group Assistant, Seminarist, Religious Brother/Sister	Date of Background Check (Completed by Diocesan Office ONLY)	Date of PGC (Completed by Diocesan Office ONLY)
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Number of Adults Verifying
(DIOCESAN SEAL)

Signature of Bishop/Vicar General/
Chancellor/Vice Chancellor

Date Verified and Signed



Diocese of St. Petersburg Adult Chaperone Verification Form

As bishop of the Diocese of St. Petersburg (“Diocese”), the Safe Environment Office, on my behalf, has verified that each adult listed below has a current FBI Background Check and is cleared in accordance with the Diocese of St. Petersburg Policy for the Protection of Children and Vulnerable Adults and, the Florida Conference of Catholic Bishops, and the US Conference of Catholic Bishops Policy for the Protection of Children and Young People. No adult will be permitted to attend as a volunteer or participate on behalf of the Diocese who does not have a current FBI Background Check and has successfully completed Safe Environment Program training for adults who wish to have the care, responsibility, and or supervision of children and vulnerable adults. The individuals listed on this declaration are as follows:

Parish/School Affiliation:				
Destination Address:				
Dates:				
Count	Last Name	First Name	Social Security # (Last 4 digits)	Position (Group Leader, Priest, Adult Chaperone)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Number of Male Youth on Trip:	
Number of Female Youth on Trip:	

Number Verified:	
Bishop’s Signature:	
Date:	



STEUBENVILLE
CONFERENCE

Group Leader and Adult
2023 Verification Form
Diocese of Venice

As Bishop/Vicar General/Chancellor/Vice Chancellor of the Diocese of **Venice**, I hereby notify Catholic Servant Ministries, Inc that each adult listed below has been background checked and cleared in accordance with the policies of the Diocese under the "Charter for the Protection of Children and Young People" as set forth by the United States Conference of Catholic Bishops. I understand that no adult will be permitted to attend as a volunteer or participate that has not been cleared by their home diocese and is listed on this declaration.

Parish/Group Name: _____

#	Full Legal Name (Must Match Online Registration)	Group Leader, Chaperone, Young Adult Group Assistant, Seminarist, Religious Brother/Sister	Date of Background Check (Completed by Diocesan Office ONLY)	Date of PGC (Completed by Diocesan Office ONLY)
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Number of Adults Verifying Signature of Bishop/Vicar General/
Chancellor/Vice Chancellor Date Verified and Signed

(DIOCESAN SEAL)





As (Arch)Bishop/Vicar General/Chancellor/Vice Chancellor/Safe Environment Director of the (Arch)Diocese _____ I hereby notify Catholic Servant Ministries, Inc and the Steubenville Florida Conference Office that each adult listed below has been background checked and cleared in accordance with the policies of the Diocese under the "Charter for the Protection of Children and Young People" as set forth by the United States Conference of Catholic Bishops. I understand that no adult will be permitted to attend as a volunteer or participate that has not been cleared by his or her home diocese and is listed on this declaration.

Parish/Group Name: _____

#	Full Legal Name (Must Match Online Registration)	Group Leader, Chaperone, Young Adult Group Assistant, Seminarist, Religious Brother/Sister	Date of Diocesan Background Check (Completed by (Arch)Diocese ONLY)
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Number of Adults Verifying Signature of Bishop/Vicar General/
Chancellor/Vice Chancellor/
Safe Environment Director Date Verified and Signed

(DIOCESAN SEAL)



Steubenville Florida High School
 Youth Conference 2023
T-Shirt Size Order Form

Please indicate the number of T-Shirts per size.
 The total number of T-Shirts ordered should match the number of
 T-Shirts ordered on your group registration.

Group/Parish Name: _____

Group Leader Name: _____

Please note that we only offer adult sizes

Size	Number of T-Shirts
Small	
Medium	
Large	
XL	
2XL	
3XL	
4XL	
Total	

Email this form back to:
info@steubenvilleflorida.com

Steubenville Florida Conference Office by **June 2nd**

Rosen Shingle Creek: Policies and Payments

Room Assignments List

All group leaders must provide the hotel with a room assignment list on or before **June 16th by 5pm**. If you fail to provide this list by **June 16th by 5pm**, any rooms on hold will be released and will be subject to availability.

Payment Options:

Credit Cards

- An online payment link will be provided *upon request* from groupreservations@rosenhoteles.com
- Five Days prior to arrival the credit cards provided will be authorized for one night for each room.
- If you would like to pay in full with a church credit card prior to arrival, this will expedite your check-in process.

Checks

- Mail your check for one night's room and tax for each room and include all reservations #'s or your Hotel Reservations Form (only if you booked 10 or more rooms).

Reservations Department
400 Destination Parkway
Orlando, FL 32821

- Final payments must be submitted at least 10 days prior to your arrival to avoid delays in receiving payment.
- If you reserve rooms with a credit card, you can still pay in full with a church check.

Invoices

If you need an invoice, please email groupreservations@rosenhoteles.com and the hotel can provide one. You will need to include church name, each guest name and confirmation numbers in order to process this request.

Tax Exemption

In order to be exempt from taxes, you must provide your DR-14 Florida Tax Exemption Form with room list.

Payment must be received prior to arrival with either a company check or company credit card. The name on the check/credit card must match the name on the Tax Exemption Form or you will be required to pay taxes.

Cancelation Policy

Should you need to cancel any rooms you must do so 5 days prior to your arrival to avoid a one-night penalty.



HOTEL RESERVATION FORM
2023 Steubenville Youth Conference
July 14 – July 16, 2023

THE ROSEN SHINGLE CREEK HOTEL is pleased to welcome back the 2023 Steubenville Youth Conference
To reserve 10 or more rooms, complete and send this form to:

Rosen Shingle Creek
ATTENTION: Group Housing
9939 Universal Boulevard
Orlando, FL 32819

Or email to: groupreservations@rosenhoteles.com

- Rosen Shingle Creek must receive this form with a credit card for guarantee before June 16, 2023, to secure rooms.
All forms will be processed and subject to availability in the order they were received.
If you do not include a credit card guarantee or the form is incomplete, your rooms will not be processed
Requests for pre- and post-convention dates will be accepted on a space available basis
Please include your valid Florida Tax Exemption form

Room rate is \$152.00 + 12.5% Tax
Cancel Policy is 5 days prior to arrival

Total Number of Rooms Requested: Church:

Arrival Date: Departure Date:

Contact Name:

Address:

City: State: Zip:

Daytime Phone: Email:

To confirm your room reservations a one-night guarantee is required (for each room). If sending a check, reservations will not be accepted until the entire list and check for the deposit have been received by the hotel.

CC NUMBER: EXP DATE:

CARD HOLDER SIGNATURE:

CHECK: CHECK NUMBER: TOTAL AMOUNT ENCLOSED: \$

- Credit cards provided will be authorized for 1 night's room and tax for EACH ROOM five days prior to arrival.
Rosen Hotels & Resorts will not generate purchase orders or direct billing for your rooms during this event.
If your organization is Tax Exempt, a valid Florida State Tax Exemption must be sent with an organization check or credit card to pay for the rooms in full.
Check-In Time is after 3:00pm. Check-Out Time is 11:00am. Early check-ins are not guaranteed.
Room types, room requests (connecting, king, double queen, etc.) and suites are not guaranteed, but will be granted based on availability.

I have read and understand the above information.

SIGNATURE: DATE:

Proudly, Rosen Shingle Creek is a smoke-free environment in all indoor public areas and guest rooms!

