



SPARK'DWELL 

S U M M E R 2 0 2 6

www.sparkdwell.org



WE'RE IN THE BUSINESS OF BEING KINGDOM PEOPLE

“ Kingdom people seek first the Kingdom of God and its justice; church people often put church work above concerns of justice, mercy, and truth. Church people think about how to get people into the church; Kingdom people think about how to get the church into the world. Church people worry that the world might change the church; Kingdom people work to see the church change the world. ”

IT IS OUR BELIEF THAT SERVICE WITHOUT EDUCATION IS EMPTY.

WE ARE COMMITTED TO SHARING CHRIST'S LOVE AS PEOPLE NOT ONLY ENGAGED IN SERVING OUR NEIGHBORS, BUT ALSO AS BEING FIERCE ADVOCATES FOR JUSTICE.

Because justice issues related to homelessness, hunger, poverty, racism, education disparity, and more are complex situations that require complex conversations and answers, SPARK and The Dwelling team up (Spark'Dwell) to offer opportunities for young people and adults to spend a week during the summer or fall/spring break participating in Spirit and Service Learning Experiences.

Hosted (housed) at a local partner church, participants engage in a week of relationship-building, education, story-telling and service alongside formerly or currently homeless individuals. In doing so, participants will better understand the complexity of the systems and institutions perpetuating injustice and inequity, how the church is responding as Matthew 25 people, and ways that they can continue to advocate for justice in their own communities.



FREQUENTLY ASKED QUESTIONS

1. HOW MUCH DOES IT COST

A full week (five nights) is \$480 per person. 1.0 and 5.0 weeks (four nights) are \$440. One free chaperone is included per group registration for the Winston-Salem location. Limited scholarships are available. For the Puerto Rico trip, we will provide a 1/2 price registration for one chaperone. Payment installment details are laid out in the program agreement signed by the group leader. Payment must be made by check payable to SPARK.

2. CAN WE CUSTOMIZE THE LENGTH OF OUR TRIP

Our summer trip dates are set and available on our website, but throughout the year we welcome trips of all lengths and sizes, including weekend Service Plunges, Confirmation Retreats, and Campus Ministry programs. We will work with you to negotiate the details and costs of off-season trips.

3. WHAT DOES THE COST INCLUDE

Church based housing with access to showers, complete service site coordination, supplies, and arrangement for free time outings, daily devotional content, group processing and worship leadership, and most meals.

*group will have dinner out one night at their own expense

4. WHAT AM I EXPECTED TO PROVIDE FOR OUR TRIP

Transportation during the week for all participants, bedding*, food during travel, permission/health form for each participant, signed program agreement, certificate of liability, snacks, leader background checks, and adult supervision (1 adult for every 8 student participants).

*if group is traveling by air, bedding assistance may be available

5. TRAVEL, LODGING, AND TRANSPORTATION DETAILS

Cost of transportation to Winston-Salem is not included in the participant fee. If you are traveling by plane, we're happy to recommend local airports and rental car companies to accommodate your group. Participants will be lodging at Sherwood Forest United Methodist Church in Winston-Salem and showering at the Robinhood YMCA. Overnight onsite staff will be present to manage the program, however leaders are expected to be present with their group at all times.

6. HOW MANY CAN A SPARK'DWELL EXPERIENCE ACCOMMODATE

Each week Spark'Dwell hosts multiple groups from around the country. We can easily accommodate large groups, including youth and adults. We prefer to keep our group size to a maximum of 60ish participants each week.

7. IS THERE ANYTHING ELSE WE NEED TO BRING

Your group might consider collecting and bringing an in-kind offering from your congregation. This might be coffee, creamer, and sugar, shower supplies, socks, underwear, and t-shirts, or something else. Have an idea? Let's talk!



SAMPLE SCHEDULE

SUNDAY-FRIDAY SCHEDULE

SUNDAY

4:00	Arrival
5:00	Orientation
6:00	Dinner
7:30	Worship
8:30	Church Group Time
10:30	Lights Out

MON-THURS

7:00	Lights-On
7:30	Breakfast
9:00	Empower & Send
10:00-2:00	Service Sites
2:30	Showers & Free Time
4:00	Adult Leader Meeting
6:00	Dinner
7:30	Worship/Evening Activity
9:00	Church Group Time
10:30	Lights Out

FRI

7:30	Lights-On
8:00	Grab and Go Breakfast
	Building Clean-up
9:30	Sending Worship
10:00	Goodbye!

WEDNESDAY

4:00	Arrival
5:00	Orientation
6:00	Dinner
7:30	Worship
8:30	Church Group Time
10:30	Lights Out

THURS-SAT

7:00	Lights-On
7:30	Breakfast
9:00	Empower & Send
10:00-2:00	Service Sites
2:30	Showers & Free Time
4:00	Adult Leader Meeting
6:00	Dinner
7:30	Worship/Evening Activity
9:00	Church Group Time
10:30	Lights Out

SUN

7:30	Lights-On
8:00	Grab and Go Breakfast
	Building Clean-up
10:00	Worship & Lunch at The Dwelling
1:30	Goodbye!



PARTICIPANT REGISTRATION

PARTICIPANT INFORMATION

Participant Name: _____ DOB: _____

Gender & Pronouns (She/Her/Hers or He/Him/His or They/Their/Theirs) : _____

Grade (Rising in Fall): _____ Age: _____ Shirt Size: _____

Guardian's Name: _____

Address: _____

Guardian's Email: _____

Participant's Email: _____

Guardian's Phone #: _____ Participant's Phone #: _____

OTHER INFORMATION

Participant's Interests: (athletics, music, social media, politics, etc)

Other Information or comments you'd like to share with staff:

HEALTH CARE INFORMATION

Primary Care Physician _____ Phone Number _____

Please list any known allergies (food, plants, insects, dietary, or drug)

Please list any prescription medication (and dosage information)

Please list any medical conditions relevant to participating (surgeries, serious illness, chronic or recurring illness, conditions such as epilepsy or diabetes, mental illness, and/or physical mobility limitations)

I give permission for staff to give my child the following: (check all that apply)

Acetaminophen
Aspirin
Ibuprofen

Antihistamine
Decongestant
Antacid

Antibiotic Ointment



PARTICIPANT REGISTRATION CONTINUED

EMERGENCY CONTACT INFORMATION

Name: _____ Phone: _____
Relationship: _____ Email: _____

INSURANCE INFORMATION

Name of Health Insurance Company: _____
Group Number: _____ Policy Number: _____
Name of Policy Holder: _____
Phone Number of Policy Holder: _____
Phone & Address of Insurance Company _____

*Participants without medical insurance may still be able to attend, understanding the risk and personal liability to and and all medical payments.

**Please attach a copy of participants insurance card to this form. Information will be destroyed following service week.

PERMISSION FORM

I, parent/guardian of _____ ("Participant"), consent to Participant attending the service event organized by Share Peace and Rekindle Kindness, Inc. ("SPARK") and The Dwelling, to be held at _____ ("Host Site"), from _____ to _____, 20____. Accordingly, I agree to the following:

Behavior

SPARK and The Dwelling are both nonprofits with community service focus. Participants are expected to conduct themselves in a manner that is consistent with Christian values. Throughout the week, there will be incredible opportunities for all participants to grow in their faith through service and conversation. Accordingly, SPARK and The Dwelling expect participants to respect staff members, to follow rules and procedures (to be overviewed by SPARK and The Dwelling staff), to respect the property at the Site, and to value all participants. In addition, I understand that the participant is required to behave in a manner that ensures the safety of the participant and other participants in the SPARK'Dwell program. Consistent failure to do so could result in SPARK making the decision to remove Participant from the Service activity and/or any aspect of the SPARK'Dwell summer experience.

Travel/Service Site Safety.

Travel to and from Host Site to service locations ("Service Sites") are part of the SPARK'Dwell program. Service activities may include, but are not limited to, construction projects, landscaping, interpersonal work with community members (including young children at times), and other service activities ("Service Activities"). SPARK and The Dwelling will not transport participants during the service event unless in emergency situations. Participants will be transported by Participant's group chaperone(s). I understand that the SPARK and The Dwelling staff will exercise reasonable care during all Service Activities with respect to the design and administration of the Service Activities; however, I understand that some risk is inherent in the Service Activities regardless of SPARK and The Dwelling's efforts. Therefore, the participant agrees to follow any rules and safety procedures outlined by SPARK and The Dwelling staff or participant's chaperone.



PARTICIPANT REGISTRATION CONTINUED

Emergency Care

I understand that SPARK and The Dwelling staff are not licensed medical professionals, but that they will make their best efforts to provide reasonable first aid care to participant in the event of a minor injury, such as a small cut or scrape, and I authorize them to do so. However, in the event of a more serious accident or illness during a SPARK'Dwell event that needs immediate treatment, I agree to participant receiving first aid & medical treatment from qualified practitioners, including lifesaving treatments, as may be considered necessary by a licensed medical provider. I authorize the transportation of my child (without notice to parent/guardian, if not practical), by ambulance if necessary, to the nearest available medical facility. I understand the extent & limitations of my medical insurance and that it is primary, unless otherwise specified. I will inform the SPARK staff immediately if there is any change in medical circumstances (including changes to insurance coverage) regarding the participant from the date signed below through the conclusion of the SPARK'Dwell program. In an emergency, a SPARK or The Dwelling staff member or Participant's group chaperone(s) will contact the parent/guardian as soon as reasonably possible.

Image Release

SPARK and The Dwelling staff will be taking photographs throughout the week to document the time at SPARK'Dwell. Consequently, I, the undersigned, hereby give consent to SPARK and The Dwelling to use the image and likeness of the Participant in its promotional publications, advertising, videos or other media activities (including the Internet). Further, I acknowledge that neither I nor the Participant will receive compensation for such uses.

Technology Policy

I acknowledge that Participant assumes the risk of theft or loss for any electronic device(s), including cell phones, that Participant elects to bring to a SPARK'Dwell program and under no circumstances will SPARK or The Dwelling be held liable for damage to electronic devices. Further, I agree to allow SPARK and The Dwelling staff to set the appropriate times for Participant to use electronic devices and I consent to SPARK and The Dwelling staff having discretion to take away any electronic devices from Participant should they become overly distracting. In such instances, the electronic devices will be held in a reasonably secure location and returned prior to Participant's departure from SPARK.

Liability Limitation

Parent/Guardian and/or Participant hereby agrees to hold harmless SPARK and The Dwelling from any and all liability for any harm or damages incurred by Participant arising out of the SPARK'Dwell program. Any legal dispute arising out of the SPARK'Dwell Program will be governed by the laws of North Carolina and all parties hereto consent to the exclusive jurisdiction of the applicable court in Forsyth County, North Carolina to resolve any such matter.

BY SIGNING BELOW YOU ARE AGREEING TO THE TERMS STATED HEREIN AND ACKNOWLEDGING THAT ALL INFORMATION PROVIDED ON THE ABOVE REGISTRATION AND HEALTH PROVIDER INFORMATION FORMS IS ACCURATE.

TripParticipant (if 18+)

Print Name: _____

Signature: _____

Date: _____

Parent/Guardian of Minor Participant

Print Name: _____

Signature: _____

Date: _____



PACKING LIST

CLOTHING:

- Shorts
- Long pants for cool nights and/or work projects
- Short-sleeved shirts or tanktops with thick(ish) straps
- Long-sleeved shirt, sweatshirt and/or light jacket for cool nights or air conditioned spaces
- Underwear and socks
- Sleeping clothes
- Tennis shoes or work boots (closed-foot)
- Sandal/Strap-on Shoe
- Swimsuit (for showers if it makes a student more comfortable and/or the possibility of swimming)
- Rain Jacket

OTHER STUFF:

- Small shower bag or backpack
- Soap, shampoo, deodorant, other toiletries, extra contact lenses, backup pair of glasses, etc.
- Bible, pen, & notebook
- Reusable water bottle
- Sunscreen, lip balm, hat, sunglasses, bug spray
- Spending money for snacks, gifts, etc.
- Lunch box
- Phone/camera chargers
- Medications as needed (please provide your Leader with a list of medications, times, etc)
- Snack to Share
- Towel/Washcloth (Consider bringing 2)
- Airmattress or sleeping pad
- Bedding (Blanket/Sleeping Bag)
- Pillow



SPARK'DWELL PROGRAM AGREEMENT

SPARK'Dwell trip programming is collectively run by Share Peace and Rekindle Kindness, Inc. and The Dwelling and is referred to hereby in this agreement as ("SPARK" or SPARK'Dwell).

This SPARK Program Agreement ("Agreement"), dated _____ ("Effective Date"), is by and between Share Peace and Rekindle Kindness, Inc., a non-profit organized under the laws of North Carolina ("SPARK"), located in Winston-Salem, North Carolina, and _____ ("Participating Group"), located at _____ separately a "Party"; collectively, the "Parties").

Background

SPARK designs, organizes, and conducts service projects for a variety of social causes.

Participating Group desires to participate in SPARK's service project to be held in [INSERT CITY/STATE _____] from [INSERT STATE DATE ____/____/____] to [INSERT END DATE ____/____/____] ("Program").

Accordingly, the Parties agree as follows:

1. Key Contact Person.

The person at SPARK to direct all questions to is:

Amber Harris

Executive Director, SPARK

executivedirector@spark-community.org

540-230-2923

The key contact person for the Participating Group is:

2. Fees. SPARK charges a fee for Programs to cover costs associated with the service projects. The fee to participate in this Program is \$480 or \$440 per participant. SPARK is happy to grant Participating Group one free chaperone for the Program. The estimated number of participants for Participating Group is _____, for a total group fee of _____ ("Fee") for the Program. The Fee shall be paid in three installments. Ten percent (10%) of the Fee shall be due at the time that this Agreement is signed and returned to SPARK ("The Registration Fee"). Fifty percent (50%) of the Fee shall be paid sixty (60) days prior to the start date of the Program, in this instance [INSERT FIRST PAYMENT DATE ____/____/____] ("The First Payment"). The remaining balance shall be paid fifteen days prior to the start date of the Program, in this instance [INSERT SECOND PAYMENT DATE ____/____/____] ("The Second Payment"). Other than as outlined in paragraph 3, all payments are non-refundable once they have been submitted to SPARK. At the time of the First Payment, Participating Group shall be locked into the number of participants paid for at that date, and the Second Payment shall automatically be determined by the number of participants paid for with the First Payment. While Participating Group may not decrease the number of participants after the First Payment, it may increase the number of participants beyond that point provided that SPARK approves such an increase. In the event of an increase, the Second Payment will be adjusted to include any amounts owed for additional participants.

3. Early Termination. Participating Group may terminate this Agreement at any time; however, Participating Group will forfeit any monies paid or due to SPARK at the time of such termination. SPARK may terminate this Agreement at any time. In the event that SPARK terminates this Agreement due to no fault of Participating Group, SPARK will issue Participating Group a refund for all payments made to SPARK, less The Registration Fee, which is not refundable under any circumstance.

4. Permission Forms. Participating Group agrees to require all participants to fill out the SPARK registration forms (which will be provided after receipt of this signed Agreement) and further agrees to submit such forms to the SPARK Contact Person outlined above no later than fifteen (15) days prior to the start date of the Program.

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SPARK'DWELL PROGRAM AGREEMENT

5. Participating Group Conduct.

Participating Group agrees to follow all rules outlined by SPARK staff and to hold its participants accountable for following the rules as well. In addition, Participating Group understands that SPARK expects all participants to treat each other, SPARK staff, community members, and the property of the host site which houses Participating Group and all service sites with respect. Participating Group agrees to hold its participants accountable to this standard. Behavior that will be considered in violation of this provision shall include, but not be limited to: possessing or using cigarettes, alcoholic beverages, and/or illegal substances; physical or verbal (including hateful, discriminatory, sexually explicit, threatening, or otherwise offensive) abuse, harassment, or violence towards another participant, a SPARK staff member, or a community member; possession of a weapon; stealing or intentionally destroying or severely damaging property; sexually suggestive or offensive behavior towards another participant, SPARK staff member, or community member; and/or any other similar behavior which is severely inappropriate or extremely offensive by nature. SPARK reserves the right to remove a participant or even an entire Participating Group from the Program if conduct consistently or severely violates this standard.

6. Safety.

The safety and health of all participants is important to SPARK. Participating Group understands and acknowledges that some service projects will include activities that have inherent safety risks. As such, SPARK staff will use its best efforts to address safety concerns as they arise and inform Participating Group's chaperones about known safety issues; however, Participating Group agrees that it will be the responsibility of its chaperones to enforce safety standards and ensure that all participants are aware of safety issues. Furthermore, Participating Group acknowledges that safety is best achieved by every participant taking responsibility and agrees to hold its participants accountable for behaving in a manner that is appropriate for the safety risks inherent in the Program's service project. Participating Group assumes the risk of these activities and, other than as outlined in section 9, agrees to hold SPARK harmless for personal injuries or other damages that occur during the Program.

7. Insurance.

Participating Group is required to have a general liability insurance policy with a minimum umbrella policy coverage amount of \$1,000,000.00. Please provide the indicated information below. If insurance information changes at any point between the Effective Date and the end of the Program, promptly provide updated information to SPARK. Insurance Provider: _____ Insurance Provider's Phone Number: _____ Insurance Policy Number: _____ Insurance Policy Expiration Date: _____

8. Chaperones.

Participating Group certifies that it has or will (prior to the start of the Program) complete a background check on every chaperone. Participating Group agrees that SPARK is not responsible to conduct a background check on chaperones and is not liable for consequences of any chaperone's behavior.

9. Liability Limitation.

TO THE FULLEST EXTENT PERMITTED BY APPLICABLE LAW, PARTICIPATING GROUP AGREES THAT, OTHER THAN FOR SPARK'S NEGLIGENT OR INTENTIONAL ACTS OR OMISSIONS, SPARK WILL NOT BE LIABLE FOR ANY PROPERTY DAMAGE, PERSONAL INJURY, INCIDENTAL, SPECIAL, INDIRECT, PUNITIVE OR CONSEQUENTIAL DAMAGES INCURRED BY PARTICIPATING GROUP OR ITS INDIVIDUAL PARTICIPANTS WHICH ARISE OUT OF OR ARE RELATED TO THE PROGRAM. NOTWITHSTANDING THE PREVIOUS, IF SPARK IS DETERMINED TO BE LIABLE FOR ANY SUCH DAMAGES BY A COURT OF COMPETENT JURISDICTION, THE PARTIES AGREE THAT SPARK'S LIABILITY SHALL NOT EXCEED THE TOTAL FEES PAID BY PARTICIPATING GROUP TO SPARK UNDER THIS AGREEMENT.



SPARK'DWELL PROGRAM AGREEMENT

10. General Provisions.

This Agreement shall be governed by the laws of North Carolina, without regard to its conflict of laws principles, and the Parties agree to the exclusive jurisdiction of the applicable federal or state court situated in Forsyth County, North Carolina to resolve any dispute arising hereunder. This Agreement may not be modified or assigned without signed written consent by both Parties. This Agreement is the final written agreement between the Parties and supersedes any previous written or oral agreement between the Parties. Neither Party shall be liable for failure to fulfill its obligations under this Agreement due to circumstances beyond their reasonable control. If any provision(s) of this Agreement is determined to be invalid or unenforceable by a court of competent jurisdiction, such provision(s) shall be severed from this Agreement and the remaining provisions shall remain in full force and effect. This Agreement may be signed in counterparts, all of which together shall constitute one Agreement, and may be transmitted by electronic means.

Signatures

IN WITNESS WHEREOF, all Parties have caused this Agreement to be signed as of the Effective Date, by their duly authorized representative.

SPARK'Dwell Participating Group

Print Name: _____

Signature: _____

Title: _____

Date: _____

Print Name: _____

Signature: _____

Title: _____

Date: _____

Print Name: _____

Signature: _____

Title: _____

Date: _____

[illegible]