



2013

## Rites of Passage Application Package



**Metropolitan Baptist Church**

96 Harry S. Truman Drive

Largo, MD 20704

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Senior Servant

As Metropolitan Baptist Church continues to help minister to and enhance the lives of its members and the community, Metropolitan's Men's Ministry has launched a program aimed at encouraging adolescent young men towards excellence, with the focus on youth ages 13-16.

The "Rites of Passage" Ministry (ROP) is comprised of a strongly structured developmental plan that instills Christian morals and values that address and focus on the individual needs of a young man.

The Rites of Passage will demonstrate to the greater community of mentoring programs that young black men need to be recognized and receive support from positive influences to enrich their lives. The youth recruited for the ministry will be linked with trained mentors in a one – on – one mentoring venue and group settings at various retreats and outings. The mentors will have been thoroughly screened using appropriate reference and criminal background checks.

### **What is "Rites of Passage?"**

The Rites of Passage Ministry was developed from the African tradition of passage from the child stage into the adult stage of development. The term passage means the act or process, transition or movement from one condition to another. For us, Rites of Passage is the celebration marking the successful transition from one life stage to another.

### **ROP Ministry Benefits**

*Group and one – on–one mentoring venues will be implemented using trained mentors. A structured curriculum and evaluation process will also be key for program success. The youth recruited for the "Rites of Passage" will be linked with mentors who have a desire to work with "young men with the greatest need" and have received training in general guidance, emotional support and mentoring (CAPI). The mentors will have also been thoroughly screened using appropriate reference checks, child and domestic abuse record checks and criminal background checks.*

## **Five distinct areas of development have been established as the core for the training of youth**

### ***SPIRITUAL GROWTH***

Teaching the children God's word as they discover their purpose. Teaching children Christian morals and values result in a sharper sense of self-identity, more self-assurance and greater decisiveness to make situational and life decisions. The children are encouraged to become involved in church ministries and activities such as the youth usher board, choir and missionary programs.

### ***SOCIAL SKILLS***

Teaching the children how to interact with other people in society (peers, adults, teachers and families). Exposing children to arts and culture. Teaching children communication skills. Creating positive group encounters that encourage teamwork and demonstrate unity.

### ***PHYSICAL GROWTH***

Showing children how to maximize the potential of their physical body. Educating them about the dangers of substance abuse and unproductive high-risk behaviors prevalent in today's society. Promoting healthy living and eating habits.

### ***ACADEMIC SKILLS***

Challenging the youth to gain knowledge, wisdom and understanding. Encouraging them to excel in school and motivate them towards post secondary education or job training.

### ***EMOTIONAL MATURITY***

Developing stability in their relationships with others. Teaching the children to discover their own identity and become emotionally grounded. To make intelligent decisions to withstand peer pressure.

These five areas of development are dependent upon each youth gaining the proper perspective of God's desire for how each should live. To that end, five spiritual principles serve as the foundation of the program; **Discipline, Obedience, Sacrifice, Unity and Purpose.**

Each of these topics is introduced during the weekend retreats. In addition, material covering the core areas of social skills, physical abilities, emotional maturity, spiritual growth and academic skills are addressed.

## **There are five groups of people that will work together for the ministry to reach its goal.**

### **The Youth**

The young men that participate in the ministry program make a 4-6 month commitment to the Rites of Passage program. The youth will be challenged to strive towards Spiritual, physical, emotional and social excellence.

### ***The Parents and/or Guardians***

The parents of the youth make a commitment to assist the ministry in working with their child. The parents must play an active role in this ministry. Parents must encourage, support, talk, discipline and allow the child to grow.

### ***The Mentors (Guides)***

The guides are the male mentors that actually work with the youth during the program. They are responsible for helping the learners gain as much knowledge as possible while in the program. The guides work closely with parents, Council of Elders and the directors to provide the best assistance to each youth. They make a 6-8 month commitment to the youth and the Rites of Passage program.

### ***The Council of Elders***

The council is a board of directors consisting of men and women that serve as a resource for the ministry. Their insights and wisdom is used to guide the program. All parts of the ministry are accountable to the council. They make a yearlong commitment to the learner and the Rites of Passage program.

### ***The Ministry Directors***

*The directors are the last critical piece in the rites of passage ministry.*

The Ministry Directors are responsible for planning, directing the operations of the “Rites of Passage” ministry, managing daily operations, advertising, marketing, recruitment of mentors and youth. The directors are responsible for all program personnel, budgeting and formulating policy and procedures of program.

## **THE ROP PROCESS**

The process in the Rites of Passage begins with each youth submitting a request in the form of an application for him to be in the program. The application is reviewed by the program's directors, members of the Elders Council and ROP Ministry. Directors will then interview the youth. It is important that the youth and the parent understand the decision to apply and be interviewed must strictly be that of the youth and not the parent. After the interview, the youth will be notified of acceptance or non-acceptance into the program.

The next step is to participate in the Separation Ceremony. This ceremony is symbolic of the separation of the child from its parents to be led to the place of learning and training by the adults in the village. This process is symbolic in nature only. No child is actually removed from the care and responsibility of the parent or guardian. The separation ceremony is part of the annual Rites of Passage banquet.

During the ceremony the youth are challenged to accept the commitment placed before them by the Council of Elders. Although accepted into the program, each youth will have this last opportunity to decide whether to commit to the program. The youth are advised that it is better to decide not to make a vow than to make a vow and break it.

After the ceremony, the youth will be involved in activities and training to help them reach the goals of the program. It is the responsibility of each youth to gain the most out of the program.

At the end of the cycle, the youth participate in the Rites of Passage Completion Ceremony celebrating their accomplishments while in the program. This time of celebration brings the village together in thanksgiving for God's blessing of the past 4-6 months and the presentation of the youth to the congregation (village).



## Metropolitan Baptist Church Men's Ministry

### Rites of Passage Ministry

#### Youth & Parent Application Form

Application may be returned to the Ministry Leader directly  
or mailed to the MBC Office: 96 Harry S. Truman Dr., Largo, MD 20704

#### Please Print All Information (Youth)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ MI \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Name of School \_\_\_\_\_ Grade \_\_\_\_\_

Home Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

Why do you want to be involved with Rites of Passage? **(provide response on a separate page)**

#### YOUTH COMMITMENT FORM

As a participant in the Rites of Passage Program, I agree to the following:

1. I will be present for and actively participate in all sessions.
2. I will complete all readings and assignments.
3. I will be respectful to the facilitators, mentors (guides), volunteers and my fellow brothers in the rites process.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**PARENT/GUARDIAN CONTACT INFORMATION**

Parent(s)/Guardian(s): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

In Case of Emergency Contact:

\_\_\_\_\_  
Name of Primary Emergency Contact Relationship to Participant

Home Phone \_\_\_\_\_

Cell or Other Alternate Phone \_\_\_\_\_

List 5 of Your Child's Strengths (academic, social, personality, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

List 5 Areas of Growth You Desire for Your Child

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

What one thing would you like to see your child accomplish through his rites process?

\_\_\_\_\_

## Parental Commitment Form

In order for my child to benefit from the program, I understand that participation and cooperation from the parent and child are necessary. To that end, I agree to the following:

1. I will make sure that my child is present for each session.
2. I will make sure that my child completes assignments.
3. I will disclose pertinent information and access to my child's mentor (guide).

Participation in the Rites of Passage Program is a privilege, not a right. The Rites of Passage Ministry reserves the right to dismiss from the program any participant who does not follow the rules and/or direction from ministry leadership.

Print Child's Name \_\_\_\_\_

Print Parent's Name \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_



**EMERGENCY MEDICAL/INSURANCE INFORMATION**

Information provided will be held in strict confidence and only shared with ROP leadership on a need to know basis.

**INSURANCE INFORMATION**

Medical Insurance Company \_\_\_\_\_

**AUTHORIZATION**

I/We authorize any treatment and/or hospital care deemed advisable under the supervision of a licensed medical physician. Such treatment may include, but is not limited to, x-ray examination, anesthesia, medical or dental procedures.

\_\_\_\_\_  
PRINT PARENT NAME

\_\_\_\_\_  
PRINT PARENT NAME

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
PARENT SIGNATURE

**FOOD ALLERGIES**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MEDICINE ALLERGIES**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE LIST ALL OTHER ALLERGIES**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CURRENT MEDICATIONS BEING TAKEN** – (Please list all medications, including over-the-counter medications, the dosage to be administered and the frequency/conditions in which it is to be administered.)

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**DIETARY RESTRICTIONS**

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**PLEASE LIST ANY OTHER HEALTH-RELATED CONCERNS OR RESTRICTIONS TO ACTIVITY**

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**ADDITIONAL REMARKS**

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## Parental Consent Form

I/We agree to allow my (our) child, \_\_\_\_\_ to participate in the Metropolitan Baptist Church Rites of Passage. I/We understand the rules, regulations and structure of the program and agree to abide by them. I/We understand that meetings and activities involving my child will take place at Metropolitan Baptist Church or its other facilities. I will be notified in advance of any activities that are to take place away from the church's property and I will be required to provide written permission for my child to participate in any such off-site activity. My child has permission, without restriction, to participate in all snacks/meals, regular and special programming, and other activities (where applicable), unless I notify the church otherwise in writing. I understand and realize Metropolitan Baptist Church will follow safety procedures, but that all physical activities include a certain risk and that Metropolitan Baptist Church assumes no liability for injury or damage arising from or as a result of participation. I affirm that I have been advised that Church Youth Activities include certain risks and dangers. These risks include, but are not limited to loss of or damage to personal property, injury, or fatality. In consideration of, the right to participate in all Metropolitan Baptist Church activities and the services and food arranged (when applicable) for my child by Metropolitan Baptist Church, and its agents, servants, and employees, I have assumed all of the above risks and intending to be legally bound hereby, will hold Metropolitan Baptist Church and its agents, servants, and employees harmless from any liability which may arise out of or in connection with any trips and related participation in any other activities arranged for by Metropolitan Baptist Church, its agents, servants, and employees. The terms hereof shall serve as a RELEASE AND ASSUMPTION OF RISK for any minors. I/we give permission to the Metropolitan Baptist Church Rites of Passage Ministry to obtain images of my child to be captured during meetings and activities through video, photo, and digital camera. These images will be used solely for the Rites of Passage Ministry promotional purposes, included but not limited to, website content, media press releases, and Metropolitan Baptist Church publications. I/We waive any and all rights of compensation and ownership of said images. Additionally, I also give permission for Metropolitan Baptist Church to use my child's name, voice, and/or testimonial in any type of promotional material, press releases, and news stories about Metropolitan Baptist Church. I understand I can notify a Program Director if this is unacceptable. I understand that Metropolitan Baptist Church's Rites of Passage Ministry reserves the right to dismiss any participant when it is deemed necessary by the staff and chaperones to be in the best interest of the child or the church.

\_\_\_\_\_  
Print Name of Parent/Guardian

\_\_\_\_\_  
Print Name of Parent/Guardian

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



**METROPOLITAN BAPTIST CHURCH**

**Miracle Plaza: 96 Harry S. Truman Drive \* Largo, MD 20774 \* 202-238-5000**

**Worship Services: 1400 1st Street, NW \* Washington, DC 20001**

**Dr. H. Beecher Hicks, Jr., Senior Servant**

**[www.metropolitanbaptist.org](http://www.metropolitanbaptist.org)**