NAZARENE YOUTH CONFERENCE 2015

YOUTH LEADER PACKET

Southern Florida District Nazarene Youth International



Greetings Southern Florida District NYI Pastors and Youth Workers,

NYC 2015 Louisville will be here before we know it! Our youth need to be presented with this opportunity now, so they can begin preparing. All the information you need to get started is in this packet. The three most important things you'll need to do now are:

1) Pray for this event 2) Get the info out to your students/hang posters 3) Plan and Fundraise like crazy! In this packet you will find:

- -NYC Cover Letter
- -Student Registration forms & Instructions
- -Adult Registration forms & Instructions
- -Promo Poster

- -Frequently Asked Questions
- -Tally Sheets
- -Tentative Schedule

All information and forms are also available on the district website: http://sfnazarene.org/.

Online there will be a "Leader's Packet", an "Adult Sponsor Packet", and a "Student Packet."

If you make copies from your Leader's Packet for your students, please include the following sheets in their packets: NYC Cover Letter, Registration Instructions, Student Registration Form, Medical Release, Reference Sheet, Guidelines Sheet, Frequently Asked Questions, and Tentative Schedule

*Youth Pastors/Leaders please have your Senior Pastor complete the Personal Reference Form.

Over the years we have seen NYC impact local youth groups in numerous positive and unexpected ways and we are confident that it can happen again this year. The NYC Council is working hard to make NYC 15 more appealing for our youth. The "exhibit hall" will not be called the exhibit hall anymore, it will be a "Rec Hall" and much bigger for students to have tons of fun!! The "workshops" will not be seminars to choose from to sit and listen. It is going to be "The Experience" where they get to experience The Lord's Prayer in hands on, tangible ways. It's going to be awesome! The theme of NYC 15 is "Thy Kingdom Come." We are getting very excited about NYC and hope that we can express that excitement to our district and have more registrants for Southern Florida than ever before!

All registrations will be in paper form and all payments will be submitted with a church check. FOLLOW THE PAYMENT SCHEDULE & SEND A TALLY SHEET WITH EACH PAYMENT Registrations and 1st payments may be submitted anytime during the registration periood

PASTORS: YOU MAY NEED TO GIVE A COPY OF THE PAYMENT SCHEDULE & TALLY SHEET TO THE CHURCH TREASURER (or whoever pays the bills)

Please stay informed of the latest news and announcements by checking the district website sfnazarene.org or joining the Southern Florida District NYC 15 Facebook Page.

REGISTRATION PERIOD: OCTOBER 1, 2014 - DECEMBER 5, 2014

Your Southern Florida District NYC Staff,

Stephanie Wallace NYC Coordinator stephaniewallace8@yahoo.com Ben Wallace
District President
bwallace@fcnbonline.org
941-405-7349





Nazarene Youth Conference Louisville, KY • July 5-13, 2015 NYC2015.COM

Southern Florida District

Nazarene Youth International

INVITES YOU TO





The biggest YOUTH EVENT

in the Nazarene church & it only happens once every 4 years!!



DON'T MISS IT!



TRANSFORMED HEARTS

REGISTER BY DECEMBER 2014

sfnazarene.org

NYC Coordinator ● Stephanie Wallace ● stephaniewallace8@yahoo.com *NYC IS OPEN TO STUDENTS IN THE 8TH-12TH GRADE DURING THE 2014-2015 SCHOOL YEAR*

NYC 2015 Southern Florida District NYI WHY SHOULD I ATTEND NYC 2015?

What is NYC:

NYC or "Nazarene Youth Conference" is a gathering of thousands of high school teenagers from the USA and Canada to experience dynamic speakers, powerful worship services, high-energy concerts from the leading artists in Christian music, service projects that impact the host city in significant ways, and so much more. NYC occurs only once every four years and for most, presents a "once-in-a-lifetime" opportunity to join in with thousands of Nazarene students to experience God's presence in various ways.

Purpose of NYC:

Gather USA/Canada NYI students and leaders for worship, discipleship, service, celebration, and leadership development. Impact the host city and serve the people of Louisville through a variety of projects and presence. Call students to a dynamic life in Christ and provide experiences that compel them to make a difference in their church, community, and world.

Resources:

Fundraiser Ideas

- -http://sfnazarene.org/
- -Southern Florida District NYC 15 Facebook Page
- -http://nyc2015.com/

- -Garage Sales -Letters to family & friends -Spaghetti Dinner after church
- -Instead of presents @ Christmas, ask for NYC \$

Note from your NYC Coordinator:

NYC is a life transforming experience. As a student I attended NYC 1999 in Toronto, Canada and it was there that I decided that being a follower of Christ was what I wanted to be. You really can't put a price tag on that! NYC IS expensive but most things that are great for you require sacrifice, don't they? Thousands of teenagers from Nazarene youth groups all over the United States and Canada will gather in Louisville, KY next summer to worship God, grow in their relationship with Him and leave with a passion to live for Jesus the rest of their lives. We want to do everything we can to make this experience a reality for any high school student who would like to attend. NYC happens once every four years which presents most students with a once in a lifetime opportunity to attend this conference. I hope we will see you next summer at NYC 2015 in Louisville, KY.

Yours in Christ,

Stephanie Wallace Southern Florida District NYC Coordinator stephaniewallace8@yahoo.com 941-405-7367



NYC 2015 Southern Florida District NYI Student Registration Instructions

- 1. Complete the Student Application, Medical Release Form, and Guidelines Sheet
- 2. Give the Personal Reference Form to your Youth Pastor or Senior Pastor to complete (have them mail the form to the NYC Coordinator. Address info is on the Personal Reference Form.)
- 3. Turn in your App, Medical Release, Guidelines, and First Payment to your Youth leader/Pastor, by 12/03/14.
- 4. Follow the payment schedule and make all of your payments payable to your local Nazarene church. The church treasurer should make 1 check at each deadline for all applicants payable to SF District NYI & mail to: First Church of the Nazarene, Attn: Stephanie Wallace, 1616 59th St W, Bradenton, FL 34209.
- 5. All future news and announcements about the trip will be posted at the following 2 locations, so please stay informed. Travel info will also be sent to the email address submitted on the application. So please list a valid email address that you frequently check.
 - Southern Florida District NYI Facebook Page Southern Florida District Website (sfnazarene.org)

Payment Schedule

**Dates below are postmark dates for the church checks. Applicants, please submit your payments to your church prior to these deadlines so the church has time to cut a check and mail to the NYC Coordinator by these dates. Thank you!

Please submit all fees to your local Nazarene Church.

Payments can be made early & for a larger amount. Tally sheets will be sent in with each payment to keep track.

PAYMENT 1 \$200 (District Fee) POSTMARK DATE: Dec 5, 2014 (REG FORMS ALSO DUE)

PAYMENT 2 \$450 (NYC Program Fee) POSTMARK DATE: Jan 5, 2015*
PAYMENT 3 \$200 (District Fee) POSTMARK DATE: March 25, 2015
PAYMENT 4 \$200 (District Fee) POSTMARK DATE: April 22, 2015
PAYMENT 5 \$200 (District Fee) POSTMARK DATE: May 27, 2015

TOTAL: \$1,250 (If NYC Program Fee is paid on time. See late fees below)

There are 2 items you are paying for:

- 1. <u>District Fee</u> (\$800) will cover travel, lodging, District and Regional sub-events, meals, t-shirts, and a few other items. All district fees need to be paid by May 27, 2015.
- 2. NYC Program Fee (\$450 if paid on time) will go to the NYC office to pay for the cost of the NYC event.
 - *If the NYC Program fee is not paid by January 5, 2015 there are late fees. (see below)
 - -\$500 NYC Program Fee if paid between Jan 6th Jan 23rd
 - -\$525 NYC Program Fee if paid between Jan 24th Feb 6th

REGISTRATION PERIOD—OCTOBER 1 THRU DECEMBER 5, 2014

NO REGISTRATIONS WILL BE ACCEPTED AFTER JANUARY 5, 2015

NYC Coordinator: Stephanie Wallace, stephaniewallace8@yahoo.com, 941-405-7367



NYC15

Student Application

The Purpose of NYC 2015 is to...

Gather USA/Canada NYI students and leaders for worship, discipleship, service, celebration, and leadership development.

Impact the host city and serve the people of Louisville through a variety of projects and presence.

Call students to a dynamic life in Christ and provide experiences that compel them to make a difference in their church, community, district, and world.

COMPLETE & RETURN THIS APPLICATON AND MEDICAL/LIABILITY RELEASE TO YOUR LOCAL CHURCH

Churches: please submit forms and payment to:

First Church of the Nazarene Attn: Stephanie Wallace 1616 59th St W Bradenton, FL 34209

	(Do not write in this space):						
	Application Rec'd	Date:					
	Med/Liab Rec'd	Date:					
	District Approved	Date:					
	Medical/Liability co						
	Online Reg C'd	Date:					
•	☐ Personal Reference Rec'd Date:						
Notes:							

PERSONAL INFORMATION

Parent/Guardian

First Na	me:	Midd	dle: La	ast Name:		
Preferre	d Name:					
Street A	ddress:					
City:	City: State/Province:					
Zip/Postal: Country:						
Student	Student Cell: Alternate Phone:					
☐ Mal	e 🗌 Female		Birth Date:	/ / (mm/dd/yy)		
Grade C	Grade Completed in July 2015: T-Shirt Size:					
Student	Email:					
Parent/0	Guardian Name	:				
Email:			Phone	e:		
Why do y	you wish to par s your journey ways will you se	ticipate in NYO	C 2015? ed like so far	? al walk with God during this		
A GREEI As an NY	MENT C 2015 partici	pant:				
I wiputUpo	I will respect my adult district sponsors and all others who are put in charge of me.					
Stud	lent	 	Date			

Date



Nazarene Youth Conference July 8-12, 2015 | Louisville, KY, USA **Student Medical and Liability Release**

Student Information

First Name:	Middle:	Last Name:		Gender:
Street Address:			City:	
State/Province:	Zip/Postal Co	ode:	Country:	
Email Address:			Birth Date: (mm/dd/yy)	
Preferred Phone:	Alternate Phone:		District:	
Parent/Guardian Contact Info				
Name:		Relationship:	☐ Parent ☐ Gu	uardian
Preferred Phone: Email:		Alternate Phone:		
Health Information Necessary In order to assist medical personnel in ar *For additional space, use separate page Do you have any special needs the	n emergency situation, please e for responses	provide the following:		
be aware of?		Family Physician:		
☐ Food allergies ☐ Ha	andicap accessible sion impaired	Physician Phone: List all current me	edications and dosage	Φζ·
Other Please provide details for any need	·	List an oan on	Wildubilo and accep	es.
		Any allergies to m	nedications?	
		Date of last tetanu	us shot:	
Insurance Information				
Primary Name:		Insurance Compar	ny:	
Policy Number:		Group #:	<u>-</u>	
Guaranty of Payment for Med				•
As	arent or guardian), on behalf of S stion with Student's participation i le further guarantees of payment Church of the Nazarene, Inc. no efend, and hold harmless Church	Student, hereby guarant in the Nazarene Youth to health care professi or Nazarene Youth Intel of the Nazarene, Inc.,	tee payment for any fees Conference 2015 (NYC : ionals and institutions wh rnational (NYI) is respons Nazarene Youth Internat	s, expenses or costs related to 2015) event. I understand and nich provide medical treatment sible for the cost of Student's tional, their respective
Authorization for Medical Tre				
In the event I cannot be reached, I authorize a to make emergency medical decisions for my expense. I also hereby release and discharge volunteers of Nazarene Youth International, its demands, expenses, personal injury, wrongful law or equity, that I or my child ever had or ma NYC 2015. I have full knowledge as to such a form, I certify that my child is healthy and fit to Further, I acknowledge that NYI and/or its ac	child. I hereby authorize that emere the Church of the Nazarene, Inc s agents, employees, officers, direct I death, causes of action, lawsuits, ay have, arising from or in any way activities and I have full knowledge or participate in all such activities.	rgency medical and/or su c. and its affiliates, along ctors, affiliates, successo damages, and liabilities related to my child's par of the probable risks inv	urgical care may be provided with any other chaperoning ors, assigns and all other from the every kind and nature, writicipation in any activities a volved. Except for those line	ed for my son/daughter at my ng adult employees or from any and all claims, whether known or unknown, in associated in any way with mitations named in this health
photographs and/or videos. I hereby give my parketing, promotional, and future event developher education institutions. In addition I ackr	permission to NYI and/or Church o elopment. I also give my permissior	of the Nazarene, Inc. to un n for my student's contact	itilize event media in all for ct information to be shared	rms and in all manners for I with USA/Canada Nazarene
Signature	Date_		_ Relationship	
PI	lease complete and Subr	mit with your App	olication	

NYC15

Student Personal Reference

PASTOR/YOUTH LEADER

2015, July 8-12, in Louisville, Poffer your personal evaluation		d on your relatio		Nazarene Youth Conference above named applicant,		
oner your personal evaluation	in the following	arcas.				
	Excellent	Good	Fair	Needs Work		
Church Attendance						
Servant Leadership						
Concern for Others						
Attitude toward Authority						
Attitude toward Peers						
Maturity Level						
How long have you known the List any emotional, physical, o considered in evaluating this a	r relational stres			's life that should be		
Any additional comments regarding this applicant's desire to be a part of NYC 2015?						
Signed			Date			
Relationship to Applicant						

PLEASE COMPLETE, SIGN, AND RETURN THIS FORM TO YOUR DISTRICT NYC COORDINATOR BEFORE JANUARY 5, 2015

First Church of the Nazarene Bradenton Attn: Stephanie Wallace 1616 59th St W Bradenton, FL 34209

KINGDOM COME

NYC 2015 Southern Florida District NYI

GUIDELINES

Submit with NYC Application

PE	ERSONAL GROWTH: (PL	EASE CHECK THE BOXES INDI	CATING THAT YOU UNDERSTAND)
	I will respect others and the			
	I will respect the property o	f the hotels we stay in while	on this trip	
	I will display attitudes that a	are uplifting, cooperative and	unifying	
	I realize that cursing and ru	ide demeaning gestures are	never acceptable behavior	
	I realize that modest and p youth leader's instructions		follow the Southern Florida N	/
	tank top style swim top and	I modest bottom, or a dark c	The ladies are to wear a 1-piece of the ladies are to wear a 2 piece that nks. Speedos will not be tolerated to the laterate laterate the laterate lat	t
<u>B</u>	US RULES:			
	I will follow the instructions	of the driver		
	I will adhere to no couples	sitting together after dark		
	I will not share blankets at	anytime		
	I will pick up my own trash	and put it in the trashcan pro	vided or take off the bus	
CC	ONSEQUENCES:			
	do not abide by these guideli Il take place as follows:	nes that I have committed to	, I realize that the consequence	es
	I will be confronted about n	ny actions and/or		
	I will be given an appropria	te type of discipline and/or		
	I will be sent home (at pare	ent's expense)		
	_			
	GREEMENT	_		
			nd staff leadership. I understan	
	e consequences if I choose no e guidelines with me, and we a		/ parent/guardian has discusse these guidelines.	a
0	gana and make			
 Stu	udent's Signature	Parent's Signature	Date	
		·		

NYC 2015 Southern Florida District NYI Frequently Asked Questions

1. How much does NYC Cost?

\$1,250 if you get registered and pay the NYC Program Fee by January 5, 2015. If you get registered late, the fee goes up as high as \$1,325.

2. Are there scholarships available?

We do not have scholarships for NYC at this time. We recommend you work with your local church to do a fundraiser a month and write donation letters to family and friends. You can also ask your church to help cover part of your cost.

3. What does the \$1,250 cover?

Everything but spending money. Your student could show up for this event with no money in their pocket and everything will still be taken care of. The \$1,250 covers transportation, lodging, food, entertainment, registration to the event, and any miscellaneous fees.

4. Do you accept any online payments? Not at this time. Church checks only please.

5. Are there any refunds?

The NYC \$450 Program Fee is non-refundable, but transferable (see next question). Any district fees paid may be reimbursed, but our ability to do so is limited. The nature of this event includes making reservations a long way in advance, therefore we will be contractually obligated to make certain payments. This will take precedence over reimbursing a student. At the end of the event, if we can make reimbursements, we will. This will be handled by the NYI Council.

6. Can a registration be transferred to another student if someone has to cancel?

Yes, in the event that a student needs to cancel, and there is another student who would like to attend, we can accommodate a Registration Transfer. This is applicable up to May 27, 2015.

7. What ages can attend?

If a student is in the 8th-12th grade during the 2014-2015 school year they may attend. So that will be the high school graduating classes of 2015, 2016, 2017, 2018, and 2019.

8. How old do you have to be to attend as an Adult Sponsor? An adult sponsor must be age 21 or over

9. What is the ratio of Adult Sponsors to Students?

The Southern Florida District requires each church that sends students to NYC to send 1 adult for every 8 students. If there are no adults to attend with your local group, we suggest getting in contact with a nearby church to see if you can combine groups. However, please note that you'll need to handle this yourself locally.

10. Is the cost the same for adults?

Yes the adult price is the same as the student price. If an adult is having trouble with the payments, we hope local churches can help supplement the fees.

11. Will there be an adult in each hotel room with the students?

Our rooming policy is: With the student to adult ratio of 8 to 1, there may be some student rooms without an adult. If there is an adult in the student room, the adult is not to share a bed with a student. There could be two students and two adults or 2 students and 1 adult, or 4 students. We will try to place the youngest students in rooms with adults first.

11. Who is the NYC 2015 Coordinator for the Southern Florida District?

Stephanie Wallace, (941) 405-7367, <u>stephaniewallace8@yahoo.com</u>
First Church of the Nazarene Bradenton, 1616 59th St W, Bradenton, FL 34209



NYC 2015 Southern Florida District NYI Tentative Schedule

SUNDAY JULY 5

Depart Southern Florida (location & time to be determined) Sleep on the bus

MONDAY JULY 6

Six Flags Over Georgia

Drive to Gatlinburg, TN and stay the night

TUESDAY JULY 7

White Water Rafting

Stay the night in Gatlinburg

WEDNESDAY JULY 8

Drive to Louisville & Check-In

1:00pm-6:00pm Registration

7:00pm-11:30pm Field Gatherings

THURSDAY JULY 9

8:00am-9:00am Breakfast by district

9:30am-11:30am Session #1

(Group Photo)

12:00pm-1:30pm Lunch via meal card

1:00pm-5:30pm Rec Hall

1:30pm-5:30pm "The Experience"

5:30pm-7:00pm Dinner via meal card

7:30pm-9:30pm Session #2

9:30pm-11:30pm Late Night Event

FRIDAY JULY 10

8:00am-9:00am Breakfast by district

9:30am-11:30am Session #3

11:30am-12:00pm Depart for MWO Projects

12:00pm-1:30pm Boxed lunch en route

1:00pm-5:00pm MWO Projects

5:00pm-5:30pm Return from MWO Projects

Boxed lunch en route

7:30pm-9:30pm Session #4

9:30pm-11:30pm Late Night Event

SATURDAY JULY 11

8:00am-9:00am Breakfast by district

9:30am-11:30am Session #5

11:30am-1:00pm Lunch by district

1:00pm-5:30pm Rec Hall open

5:30pm-7:00pm Dinner via meal card

7:30pm-9:30pm Session #6

9:30pm-11:30pm Late Night Event

SUNDAY JULY 12

8:00am-9:00am Breakfast by district

9:30am-11:30am Session #7

11:30pm Departures

Travel to Georgia, stay the night

MONDAY JULY 13

Back to Southern Florida



NYC 2015 Southern Florida District NYI Adult Sponsor Registration Instructions

- 1. Complete Adult Application & Medical Release Form
- 2. Give the Personal Reference Form to your Youth Pastor or Senior Pastor to complete (have them mail the form to the NYC Coordinator. Address info is on the Personal Reference Form.)
- 3. Turn in your Application, Medical Release Form, and First Payment to your Youth leader/Pastor, by 12/03/14.
- 4. Follow the payment schedule and make all of your payments payable to your local Nazarene church. The church treasurer should make 1 check at each deadline for all applicants payable to SF District NYI & mail to: First Church of the Nazarene, Attn: Stephanie Wallace, 1616 59th St W, Bradenton, FL 34209.
- 5. You will receive an email link to complete a background check, it must be completed by December 31, 2014
- 6. You must complete the Ministry Safe Program at your local church by December 31st and email the NYC Coordinator your completion confirmation. (If your church does not participate in the program please email the NYC Coordinator ASAP)
- 7. All future news and announcements about the trip will be posted at the following 2 locations, so please stay informed. Travel info will also be sent to the email address submitted on the application. So please list a valid email address that you frequently check.
 - Southern Florida District NYI Facebook Page -Southern Florida District Website (sfnazarene.org)

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REGISTRATION PERIOD—OCTOBER 1 THRU DECEMBER 5, 2014

NO REGISTRATIONS WILL BE ACCEPTED AFTER JANUARY 5, 2015

NYC Coordinator: Stephanie Wallace, stephaniewallace8@yahoo.com, 941-405-7367

KINGDOM

COME

Nyc15

The Purpose of NYC 2015 is to...

Gather USA/Canada NYI students and leaders for worship, discipleship, service, celebration, and leadership development.

Impact the host city and serve the people of Louisville through a variety of projects and presence.

Call students to a dynamic life in Christ and provide experiences that compel them to make a difference in their church, community, district, and world.

APPLICATION REQUIREMENTS FOR SPONSORS:

- Must have made a commitment to follow Jesus
- Must be a participating member of NYI
- Must be approved by District NYI Council and/or District NYC Coordinator
- Must complete safety screening process
- Must meet minimum age requirement of 21 years

RETURN THIS APPLICATION AND MEDICAL/LIABILITY RELEASE TO YOUR LOCAL CHURCH

Churches, please submit forms and payments to:

First Church of the Nazarene Bradenton Attn: Stephanie Wallace 1616 59th St W Bradenton, FL 34209

	District Office Use Only (Do not write in space):
	Application Rec'd Date:
	Med/Liab Rec'd Date:
	District Approved Date:
	Medical/Liability copy to NYC Office Date:
	Background Check Date:
	Ministry Safe Date:
	Online Reg C'd Date:
No	tes:

Signed

Adult Participant Application

PERSONAL INFORMATION

First Name:	Last Name:					
Preferred Name:	T-Shirt Size:					
Street Address:	1 61111 6126.					
City:	State/Province:					
Zip/Postal:	Country:					
Cell	Alternate					
Phone: Male Female Birth [_ Phone: Pate: / / (mm/dd/yy)					
Church: Er	nail:					
*For additional space, use back of page Describe activities, organizations	, or ministries with which you are					
currently involved in your church						
Please state why you desire to be an adult sponsor at this event.						
Personal Testimony: Please list 3 personal references	including Pastor/Youth Leader:					
	Š					
Name:	Phone:					
Name:	Phone:					
Name:	Phone:					
 support the above stated purpose I will supervise <i>responsibly</i> all tho I will perform all assigned duties a 	e in preparation for NYC 2015. es scheduled for NYC 2015 and fully and requirements. se placed within my care.					

Date



Nazarene Youth Conference July 8-12, 2015 | Louisville, KY, USA

Adult Participant Medical and Liability Release

Adult Participant Information

First Name:	Middle:	Last Name:	Gender
Street Address:			City:
0	Zip/Postal		-
State/Province:	Code:		Country: Birth Date:
Email Address:			— (mm/dd/yy)
Home Phone:	Cell Phone:		District:
Emergency Contact Inform	nation		
Name:		Relationship:	
		Work Phone:	
Cell Phone:		Email:	
Health Information Neces: In order to assist medical personnel in *For additional space, use separate page	an emergency situation, plea		
Do you have any special needs the aware of?	e NYC staff needs to	Family Physicia	n:
	Handicap accessible	Physician Phon	
Hearing impaired	ision impaired	List all current n	nedications and dosages:
Other	ale meteral electrical		
Please provide details for any nee	as noted above.		
		Any allergies to	medications?
		Data of last tata	and about
		Date of last teta	nus snot:
Insurance Information			
Primary Name:		_ Insurance Compa	ny:
Policy Number:		Group #:	
Guaranty of Payment for I	Medical Treatment	(Required if No Insura	nce Information above)
			th insurance policy or program; I hereby guarantee
payment for any fees, expenses, or costs Conference 2015 (NYC 2015) event. I un which provide medical treatment may be is responsible for the cost of my medical t	related to any medical treatmoderstand and acknowledge that required. I also acknowledge the treatment and I shall indemnify ectors, employees, and/or age	ent I receive in connection that further guarantees of purchast neither Church of the condition of the condition and hold harm	on with my participation in the Nazarene Youth payment to health care professionals and institution a Nazarene, Inc. nor Nazarene Youth International less Church of the Nazarene, Inc., Nazarene Youth and all claims which may be made as a result of respectively.
Authorization for Medical	Treatment and Pho	<u>otography</u>	
volunteer representing the Church of the authorize that emergency medical and/or Nazarene, Inc. and its affiliates, along wit employees, officers, directors, affiliates, s death, causes of action, lawsuits, damage have, arising from or in any way related to such activities, and I have full knowledge and fit to participate in all such activities. Further, I acknowledge that NYI and/or it photographs and/or videos. I hereby give	Nazarene to make emergency surgical care may be provided to any other chaperoning adult uccessors, assigns and all othes and liabilities of every kind a property of the probable risks involved. Its agents will be taking photogram permission to NYC 2015 and surgical care may be a ma	medical decisions on made for me at my expense. employees or volunteers ers from any and all clai and nature, whether known ties associated in any was. Except for those limitat raphs and/or videos of the and/or Church of the National for medical expensions.	any adult Nazarene Youth International employee y behalf. I,, therefore he I also hereby release and discharge the Church of s of Nazarene Youth International, its agents, ms, demands, expenses, personal injury, wrongful wn or unknown, in law or equity, that I ever had or any with the NYC 2015 event. I have full knowledge irons named in this health form, I certify that I am here NYC 2015 event and that I may appear in these zarene, Inc. to utilize event media in all forms and it hat this release form includes travel dates to and from
Signature			Date
Please complete and retu	urn with your application	on to your local ch	urch



Adult Sponsor Reference

PASTOR/YOUTH LEADER

Nazarene Youth Conference 2	2015. July 8-12.			STRICT ADULT SPON	
above named applicant, pleas	e offer your pers	sonal evaluation	in the following	areas:	
	Excellent	Good	Fair	Needs Work	
Church Attendance					
Servant Leadership					
Concern for Others					
Attitude toward Authority					
Attitude toward Teens					
Maturity Level					
How long have you known the How has the applicant served List any emotional, physical, o considered in evaluating this a	effectively in the r relational stres pplicant for part	s points (if any) icipation in NYC	in the applican 2015.	t's life that should be	
Signed Relationship to Applicant	типу инэ аррис		·		
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PLEASE COMPLETE, SIGN, AND RETURN THIS FORM TO YOUR DISTRICT NYC COORDINATOR BEFORE JANUARY 5, 2015

First Church of the Nazarene Attn: Stephanie Wallace 1616 59th St W Bradenton, FL 34209

NYC 2015 - REGISTRATION TALLY SHEET

Send a copy of this page with each church check at each deadline (Please print clearly)

ate:
hurch Name:
roup Leader:
eader Phone #:
eader Email:

	Last Name	First Name	Total Amount Paid Today	Amount toward District Fee	Amount toward NYC Program Fee
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Mail check & tally sheet to:

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