

Youth Conference Registration Form

Please select the conference for which you are registering: JYP SYP Winterlight

PLEASE PRINT CLEARLY. Return this form with a nonrefundable, nontransferable deposit of \$100 per person to: Reservations, Kanuga Conferences, P.O. Box 250, Hendersonville, NC 28793-0250
You may fax your form to 828-696-3589 or register online at www.kanuga.org.

Deposit deducted from the total fee. Balance due on the date noted on page 31. To register after the balance due date, send total amount.

The Medical Form, Parent's Authorization and Community Covenant must be filled out completely and signed for you to attend this conference.

Name _____ Age _____ Male Female

Name you prefer _____ Birth date ____ \ ____ \ ____ Grade as of Sept. 2009 _____ T-shirt size _____

Address _____

City _____ State _____ Zip _____

Church _____ Diocese _____

Parent's day/cell phone (_____) _____ Email _____

Roommate preference* _____ Is this your first visit to Kanuga? Yes No

(Housing assignments are based on grade. Requests must be mutual to be considered.)

Payment Method: Check MasterCard VISA Card Number _____ Expiration Date ____/____

Name on card _____ Signature _____

Amount enclosed \$ _____ Deposit In Full May we have permission to charge the balance due to your credit card on the balance due date? Yes No

Security Code (last three digits on back of card) _____ -REQUIRED

Parent's signature _____ Participant's signature _____

Please make your check payable to Kanuga Conferences, Inc. Committed to the principles of equal opportunity, Kanuga Conferences makes its programs available without regard to race, color, creed, religion, gender, disability, age or national origin. Unless otherwise informed, Kanuga will consider your registration as permission to use your photograph/voice for its promotion, web site and news media coverage.

MEDICAL FORM

INSURANCE CARD A copy of the front and back of the participant's valid health insurance card must be sent with this registration.

Name _____ Daytime phone (_____) _____

Medical insurance carrier _____ Group # _____

Name of insured/parent _____ ID# _____

Date of last tetanus toxoid immunization _____ Is youth presently taking any medication? Yes No If yes, explain: _____

Is there any medical matter Kanuga should be aware of? Yes No If yes, explain: _____

PARENT'S AUTHORIZATION MUST BE SIGNED. The information on this form is correct so far as I know, and the person herein described has permission to engage in all prescribed Kanuga activities, except as noted by me. In the event Kanuga is unable to reach parent or guardian in an emergency, I hereby give permission to the physician selected by Kanuga to hospitalize, secure proper treatment for and to order injection, anesthesia or surgery for my child as named above.

Signature _____ Relation _____ Date _____

COMMUNITY COVENANT for all Kanuga Youth Events

I acknowledge and accept in writing that community life at a Kanuga-sponsored youth conference is based upon mutual trust, respect for others and adherence to the spirit and to the specifics of a set of standards as follows:

- I will respect all others and their possession.
- I will treat the Kanuga staff and property with respect and will treat all buildings and furnishings with care.
- I will not use or possess alcohol, illegal drugs, fireworks, firearms or any other kind of weapon.
- I will not use or possess tobacco in any form.
- I will not ride in or drive a motor vehicle without specific permission from the Kanuga administration or the conference coordinators.
- I will remain on Kanuga property throughout the conference unless accompanied by an adult staff member designated by the conference coordinators.
- I will not participate in inappropriate sexual behavior.
- I will not alter my appearance in any permanent or semi-permanent manner (i.e. tattooing, piercing, hair dyeing).

At the beginning of the conference, the conference coordinators will announce and hand out a written list of behavior expectations established for all participants — adults, youth and staff. These include, among other things, curfews, quiet time, required participation in conference activities and places that are off limits.

Attending a Kanuga youth conference is a privilege and participants are encouraged to enter fully and cooperatively into the community life. Kanuga Conferences, through its president or a person designated by the president, reserves the right to terminate participation in the conference and to send home at his/her expense any person whose conduct is considered detrimental to the conference community or to Kanuga Conferences.

Participant's signature _____ Parent's signature _____