



**KONKO CHURCHES OF NORTH AMERICA**  
**2019 KCNA YOUTH CAMP**  
**August 6-9, 2019 (Tue-Fri)**



**APPLICATION & AGREEMENT FORM**  
**CAMPER & PARENTS & HEADMINISTER**

Name: \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_  
Street City State / Province Zip/Postal code

Konko Church of \_\_\_\_\_ Gender: **M** **F**

Birth day: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ (Must be 13-17 at time of camp)  
Month Day Year

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Grade I am attending this Fall: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Please check if you would prefer that your photo NOT be included in any KCNA publications.

**(Camper)**

I, \_\_\_\_\_, will attend the Konko Churches of North America (KCNA) Youth Camp (“Youth Camp”) with a positive attitude and participate in all activities at the Youth Camp. I have read and will obey all the rules that are set by the KCNA Youth Program Committee (see attachment A). If I violate any of the rules, I understand that I might be dismissed from the Youth Camp or asked to leave the Camp Site.

\_\_\_\_\_  
Signature of Camper Date

**(Parent/Legal Guardian) – Required for all Campers**

I, \_\_\_\_\_, understand my child’s (ward’s) responsibilities at the Youth Camp. If my child (ward) violates any of the rules or regulations set by the KCNA Youth Program Committee, the Youth Camp Coordinator and the Youth Program Director can jointly agree to dismiss my child (ward) from the Youth Camp Site. At that time, I understand that my child will be held off-site at a place to be determined and I will assume all financial responsibility for expenses incurred as a result of my child's dismissal. I have also read over and filled out the medical information form.

\_\_\_\_\_  
Signature of Parent/Legal Guardian Date

**(Head Minister)**

I, \_\_\_\_\_, understand all the above and have verified that the medical and notary forms are complete. If the Camper is dismissed from the Youth Camp, I shall assume the parent/guardian's responsibility and arrange for the camper to be sent back to the address stated above.

\_\_\_\_\_  
Signature of Head Minister Date

**NOTARIZED PARENTAL CONSENT FORM**

*To be completed by parent or legal guardian of each participant. This notarized form is required and a copy must be submitted with the rest of your application forms to KCNA Headquarters.*

I, \_\_\_\_\_, do hereby give my permission to \_\_\_\_\_  
(Parent/Legal Guardian) (Participant)  
to attend the KCNA Youth Camp to be held on 8/6/19-8/9/19 at the University of California, San Diego, 9500 Gilman Dr, La Jolla, CA 92093, USA, and also attend the KCNA Conference held on 8/9/19-8/11/19 also at the University of California, San Diego . I understand that the participant for whom I am responsible will participate at his/her own risk and I will not hold the KCNA, its officers, or the staff of the Youth Camp responsible for any injury, illness or other mishap(s) which may occur during the programs. In the event of an accident/illness, I also give my permission to the Youth Camp staff and the KCNA officers to obtain immediate medical assistance necessary for the above listed participant. Furthermore, I have verified that all required application forms have been completed. I have also read and understood the disciplinary actions that may be taken if the above mentioned participant is dismissed from the Youth Program and/or Conference site during the event dates stated above.

\_\_\_\_\_  
Name of Parent/Legal Guardian(Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Participant(Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\*\*\*\*\*

**TO BE COMPLETED BY A NOTARY PUBLIC**

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_ year of \_\_\_\_\_

\_\_\_\_\_  
Notary Public in and for the County

Of \_\_\_\_\_, State of \_\_\_\_\_.

My Commission:



# KONKO CHURCHES OF NORTH AMERICA

  

## 2019 KCNA YOUTH CAMP



### CAMPER'S MEDICAL INFORMATION FORM

Camper's Name: \_\_\_\_\_  
Last First Middle Initial Parent's Name

Address: \_\_\_\_\_  
Street City State/Province Zip Code/Postal Code

Parent's Home Phone: \_\_\_\_\_ Parent's Cellular / Work Phone: \_\_\_\_\_

Emergency Contact Phone Numbers: (h) \_\_\_\_\_ (w) \_\_\_\_\_

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

***Important: You must also return this medical form with the rest of your application form.***

1. Name of currently covered medical insurance plan: \_\_\_\_\_

2. POLICY / GROUP # \_\_\_\_\_ 3. Member Number: \_\_\_\_\_

4. a) Hospital: \_\_\_\_\_ b) Phone #: ( \_\_\_\_\_ ) \_\_\_\_\_

5. Name of Primary Care Provider (Primary Doctor): \_\_\_\_\_

6. Phone Number of Primary Care Provider: ( \_\_\_\_\_ ) \_\_\_\_\_

7. Is there any special medical condition or instructions that the participant has that we should be aware of? (Vegetarian, diabetic, high blood pressure, asthma, etc.) If so, please specifically list any special instructions below, especially in the case of an emergency.

\_\_\_\_\_

8. Is the participant currently taking any medication(s)? If so, please list the name of the medication(s), and list any special medical instructions that we need to be aware of down below.

\_\_\_\_\_

***I, \_\_\_\_\_, do hereby give my permission for (Camper) \_\_\_\_\_, to attend the KCNA YOUTH CAMP & CONFERENCE (Youth Camp). I understand that the participant for whom I am responsible will participate at his/her own risk and I will not hold the KCNA, its officers, or the staff of the Youth Camp responsible for any injury, illness or other mishap that may occur during the program. In the event of an accident/illness, I also give my permission to the Youth Camp staff to obtain immediate attention for the above listed participant.***

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

## **ATTACHMENT A - DISCIPLINARY PROCEDURES**

*Our KCNA Youth Camp philosophy has always been one of freedom, but there are certain rules that have to be established and followed by all campers. These guidelines are kept to a minimum and reflect concern for the rights of others and the law. The following are the procedures that will be followed if a Camper violates any of the rules of the Youth Camp or those additionally set by the site at which the Youth Camp is held.*

### **Youth Camp General Rules**

---

1. Campers will attend and cooperate in all meetings, activities and meals at the Youth Camp.
2. Campers cannot leave the campgrounds at any time, except when accompanied by staff members.
3. Co-ed room visitations are not allowed after evening services, except in designated meeting halls. An open-door policy will be used at all times when visiting in rooms.
4. **NO USE OF CELLPHONES, TEXTING, VIDEO GAMES, ETC. DURING YOUTH CAMP.**
5. Possession of alcohol, smoking devices, weapons (including mace), or narcotics paraphernalia is not allowed.
6. Fighting and sexual contact or behavior is strictly forbidden.

### **Violations of General Rule 1**

---

- The Camp Coordinator and/or the Youth Program Director will give a verbal warning to the Camper.

### **Violations of General Rules 2 through 4**

---

- On the first violation of any of these rules, the Camp Coordinator and/or the Youth Program Director will give a verbal warning to the Camper and confiscate any prohibited items for the duration of the Youth Camp.
- On the second similar violation, the Camp Coordinator and/or Youth Program Director will contact the parent or legal guardian regarding the violation of the Camper. The Camper will be given a second warning.
- On the third violation, the Camp Coordinator and Youth Program Director can both agree to call for the dismissal of the Camper. The Head Minister will be notified and the parent or guardian will be contacted to arrange pick-up and transportation back home for the Camper from the Camp Site.

### **Violations of General Rules 5 & 6**

---

- *Please note that alcohol, smoking devices, weapons, and narcotics will not be tolerated. Sexual contact or behavior is also not allowed. Evidence of such will mean the immediate dismissal of the Camper. The Head Minister will be notified and the parent or guardian will be contacted to accompany the Camper back home from the Camp Site.*