



KONKO CHURCHES OF NORTH AMERICA
2019 KCNA YOUNG ADULT SEMINAR
& KCNA CONFERENCE



APPLICATION & AGREEMENT FORM
STUDENT & HEADMINISTER

Name: _____
Last First Middle Initial

Address: _____
Street City State / Province Zip/Postal Code

Konko Church of _____

Birthday: ____/____/____ Age: _____ Gender: M F
Month Day Year

E-mail Address: _____ Phone: (____) _____

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

(Student)

I, _____, will attend the KCNA Young Adult Seminar & KCNA Conference with a positive attitude and participate in all activities at the KCNA Young Adult Seminar & Conference. I have read and will obey all the rules that are set by the KCNA Youth Program Committee (***read attachment A***). If I violate any of the rules, I understand that I may be dismissed from the program and asked to leave the Camp Site. Furthermore, I waive any rights that I may have to consume any tobacco products or alcohol during the Young Adult Seminar, even though I may be of legal age.

Signature of Student Date

(Head Minister)

I, Rev. _____, Head Minister of the Konko Church of _____
 _____ assume the responsibility of sending the above participant to the KCNA Young Adult Seminar & KCNA Conference. I also understand all the above and have verified the completed Medical & Application/Agreement Forms. If the above student is dismissed from the KCNA Young Adult Seminar and/or KCNA Conference, I shall assume responsibility as written in Attachment A – Disciplinary Procedures.

Signature of Head Minister Date



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PERSONAL STATEMENT

Please describe your participation in Church and/or KCNA events and tell us why you wish to attend the KCNA Young Adult Seminar and how it would contribute to the development of your faith. If more space is required, please attach another page.



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STUDENT'S MEDICAL INFORMATION FORM

Parent's/Legal
Guardian's Names:

First

Last

Camper's Name

Address:

Street

City

State/Province

Zip Code/Postal Code

Home Phone:

Cellular / Work:

Emergency Contact Numbers (other than Parent/Legal Guardian) :

(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. Are there any special medical condition or instructions that the participant has that we should be aware of? (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 below.

I, _____ understand that I will participate at my own risk, and I will not hold KCNA, its officers, or the staff of the Young Adult Seminar 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 Young Adult Seminar staff to obtain immediate medical attention and/or information.



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ATTACHMENT A - DISCIPLINARY PROCEDURES

Our KCNA Young Adult Seminar's philosophy has always been one of freedom, but there are certain rules that have to be established and followed by all students. 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 Student violates any of the rules and regulations of the KCNA Young Adult Seminar or those additionally set by the site at which the Young Adult Seminar is held.

KCNA General Rules

1. Students will attend and cooperate in all meetings, activities and meals at the Seminar.
2. Students will comply with all rules and regulations set by the campsite.
3. Students cannot leave the campgrounds at any time, except when accompanied by a staff member.
4. Fighting, gambling, or possession of weapons (including mace) is not allowed.
5. Possession of alcohol, smoking devices, narcotics, and/or drug paraphernalia is prohibited during the Young Adult Seminar. Possession of alcohol and smoking devices is prohibited in the rooms and in the presence of minors during the Conference.
6. Sexual conduct of any kind is strictly forbidden and any language that is violent and considered bullying.

Violations of General Rules 1 or 2

- The Young Adult Seminar Coordinator will give a verbal warning to the Student.
- Damages to the campsite will be paid by the student responsible for the damages.

Violations of General Rules 3 or 4

- On the first violation of any of these rules, the Young Adult Seminar Coordinator will give a verbal warning to the Student and confiscate any prohibited items.
- On the Second violation, the Young Adult Seminar Coordinator will need to call for the dismissal of the Student, in which case the Head Minister will be contacted. Student will be required to arrange their own pick-up and departure from the Camp Site and assume all financial responsibility for expenses incurred as a result of the Student's dismissal. The participant's Head Minister shall assume the responsibility for the above stated.

Violations of General Rules 5 or 6

- *Please note that alcohol, smoking devices, narcotics, weapons, or sexual conduct will not be tolerated. Any evidence will mean the immediate dismissal of the Student from the Young Adult Seminar and the Head Minister, parent/guardian, and local authorities will be contacted where applicable. The Student will be required to arrange his/her own pick-up and departure from the Camp Site and assume all financial responsibility for expenses incurred. The participant's Head Minister shall assume all responsibility for the above stated.*