District Celebrate Life 2023

Phase 2: March 10-11, 2023 Roxana Church of the Nazarene

Participant Registration Form

Please print and complete all information below

Name	AGE GRADE
COMPLETE ADDRESS	
Home Phone	Your Cell Phone
Parent/Guardian Cell Phone(s)	
MAY WE TEXT YOU DURING DCL? Y / N	GENDER: MALE / FEMALE
EMAIL ADDRESS	
Local Church	Youth Leader
T-SHIRT SIZE:(ADULT SIZES	s-S/M/L/XL/2X/3X)
_	

<u>Important Information</u>

Phase 2 District Cost is \$75 per student (individual churches may add additional expenses)

Registration forms and fees are due <u>February 21, 2023</u> without penalty. We will continue to accept forms and fees until March 1st, 2023, but a late fee of \$10 / student will apply. Registrations <u>postmarked</u> after March 1st will be returned to you and no participation will be allowed. Students who have not paid all applicable late fees will not be allowed to participate.

Checks should be made payable to: "Illinois District NYI"

Please send forms and fees to:

Jamie Toolen

Roxana Church of the Nazarene

500 N. Central Ave. Roxana, IL 62084

All fees are non-refundable

Waiver and participation Agreement

* This form must be completed prior to participation at celebrate Life *

Parental Permission and Waiver of Liability

I hereby give authority to the NYI President, the Celebrate Life Director and Illinois District sponsors attending Celebrate Life, to obtain minor medical attention or authorize medical treatment at any hospital in the event of a medical emergency. I also recognize the authority of all Illinois District NYI Sponsors, the Celebrate Life staff, and the facility staff as those who will supervise this event and uphold proper conduct. I further understand that my son/daughter could be sent home and that I could be responsible for their transportation home and any destruction of property. I agree not to hold the Illinois District Church of the Nazarene or any of its officers, workers, or volunteers responsible for any accident, injury, or theft. I also give my permission to photograph and/or video my child/children and use for promotional purposes including online and other forms

My son / daughter,	has my	y permission to attend and
Please print student's name clearly participate in District Celebrate Life.		
Parent / guardian signature:		Date:
<u>Paren</u>	t / Medical Information	
Parent(s) Name:	Home	Cell:
Emergency contact: (In case parents can not be reached)	Phone:	
Relationship to student		
Insurance Company:		
Policy Number:		
Known allergies / conditions:		

the Celebrate Life committee. I am aware that failure to do so will result in disciplinary action.

Student signature:	
Printed name:	
Date:	

ATHLETICS REGISTRATION

Team Sports: (Maximum of 2 entries for Phase 2: District Level)

(circle those that apply) (circle those that apply)

F/B/E – or – Church Name: _____* Basketball Men's / Women's

F/B/E – or – Church Name: _____* Volleyball Men's / Women's

Church Name – or – RD: _____* Dodgeball Co-ed

Table Tennis Co-ed Doubles

Individual Sports:

Table Tennis Singles Men's / Women's High School / Middle School

Hot Shot Men's / Women's High School / Middle School

Free Throw Men's / Women's High School / Middle School

Chess Men's / Women's High School / Middle School

Try-out Only Sports:

Co-Ed Soccer Tryouts will be held at 10:00 am at _____

Tennis M/WTryouts will be held at Regional Celebrate Life in May

Bowling M/WYou MUST bowl 3 games prior to DCL, then turn in score

at DCL registration. There will be NO bowling at DCL.

Score sheet must be signed by adult verifying score.

Golf M/WYou MUST golf prior to DCL, then turn in scorecard

at DCL registration. There will be NO golfing at DCL.

Scorecard must be signed by adult verifying score.

5K, Tennis, Bowling, Golf, and HR Derby competition will happen at RCL only

^{*} Basketball and Volleyball Random Draw Players – indicate Front-court/front row (F) – back-court/back row (B) – or either (E), Dodgeball Players – indicate RD for Random Draw Team

TALENT REGISTRATION

Music Er	itries: (Maximum of 2 entries) (circle those that apply)	(circle those that apply)	
	SOLO / DUET / TRIO / ENSEMBLE / CHOIR /		
D A DTN II	SOLO / DUET / TRIO / ENSEMBLE / CHOIR /	· ,	
PARINI	ER(S)		
Instrumental	SOLO / DUET / TRIO / ENSEMBLE / BAND	INSTRUMENT	
PARTNI	ER(S)		
	SOLO / DUET / TRIO / ENSEMBLE / BAND	INSTRUMENT	
PARTNI	ER(S)		
Art Entrice ENTRY 1: ENTRY 2:			
Commun	nication Entries: (Maximum of (circle those that apply)	2 entries)	
ENTRY 1:	DRAMA/ MIME / DANCE / PUPPETRY / CREA	ATIVE WRITING / SPEECH / BIBLE EXPOSITION /	
	VIDEO EDITING GROUP NAME / TITLE:		
ENTRY 2:	DRAMA/ MIME / PUPPETRY / CREATIVE WRITING / SPEECH / BIBLE EXPOSITION /		
	VIDEO EDITING GROUP NAME / TITLE:		
OTHER:	SCIENCE QUIZZING (CIRCLE IF PARTICIPATING)		

^{*} PLEASE BE AWARE THAT <u>ALL</u> COMMERCIALLY PRODUCED ACCOMPANIMENT TAPES/CD'S MUST BE ORIGINAL – NO COPIES WILL BE PERMITTED. RECORDED ACCOMPANIMENT MUST NOT HAVE VOICES SINGING IN UNISON WITH THE SINGER(S). THE SINGER(S) WILL BE JUDGED BY THE WRITTEN MUSIC GIVEN TO THE JUDGES.