

Young People's Baptist Summer Assembly

General Baptist Convention of New Jersey, Inc.

A Christian Education Training Program of the Congress of Christian Education

Rev. Dr. Guy Campbell, Jr., Convention President
Sis Merrill-Jean Bailey, Dir. of Christian Education
Deacon James Clark, Congress President

Sis. Thelma Scott, Women's Aux. President
Sis. Tonya A. Green, Registrar/Secretary
Sis. Deadra Gibbons, Executive Assistant

Evangelist Dr. Emily Cannon, Director
2009 - REGISTRATION FORM
July 12-17, 2009

*PLEASE NEATLY PRINT ALL INFORMATION

DATE: _____

NAME _____ Female _____ Male _____
Last First Middle

ADDRESS _____

City State Zip Code Phone# () _____
Area Code

DATE OF BIRTH _____ GRADE as of 9/08 _____

PARENT'S NAME _____ Phone# () _____

EMERGENCY CONTACT _____ Phone# () _____

Years of attendance at Summer Assembly 2008 _____ 2007 _____ 2006 _____ Other _____ NONE _____

CHURCH NAME: _____ Phone# () _____

CHURCH ADDRESS: _____

PASTOR: _____ CHURCH ASSOCIATION _____

AUTHORIZING SIGNATURE _____ Phone# () _____

POSITION OF PERSON SIGNING _____
(Ex. Pastor, Youth Leader, Director of Christian Ed. etc...)

MINISTRY INVOLVEMENT _____
(LIST MINISTRIES YOU ARE ACTIVELY INVOLVED IN AT YOUR CHURCH)

HOBBIES/SPORTS/INTERESTS _____

FEE: \$400.00 DEPOSIT OF \$200.00 IS DUE BY APRIL 3, 2009. (TRANSPORTATION NOT INCLUDED)

***For additional information contact Dr. Cannon at ecpsalm91@verizon.net / 856-691-3166**

*** Send registration and all forms completed with checks made payable to GBCNJ to:**

Deadra Gibbons - 6 Bridgepointe Drive, Laurence Harbor, NJ 08879

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MEDICAL PERMISSION SLIP

Student Name _____ Date _____

Do you have any allergies? Yes _____ No _____ If yes, what? _____

Are you taking medication? Yes _____ No _____ What? _____

Do you require a special diet? Yes _____ No _____ Explain _____

In case of an emergency, I understand that every effort will be made to contact the parent or guardian of students. In the event that I cannot be reached, I hereby give permission to the physician selected by the Summer Assembly Program Director to hospitalize, secure proper treatment for her/him and to order injection, anesthesia or surgery for my child as named above.

X _____
Signature of Parent or Guardian Telephone Number during Summer Assembly

Day () _____ Night () _____

Family Health Insurance Company:

Insurance # _____

Name of Family Physician & Phone #

_____ () _____
Area Code

Address _____

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TRIP PERMISSION SLIP (In the event there is a field trip)

Name _____ Date: _____
Student

I hereby give permission for my son/daughter _____ to be transported to and from the _____ on an approved off site activities under the supervision of the Summer Assembly Staff.

Signature of Parent or Guardian: _____

SENIOR GRADUATION INFORMATION

(Only Complete if you are a Senior)

For the Graduation Ceremony, students will be wearing Cap and Gowns. In order for the committee to purchase the appropriate size you must provide the following information.

Name: _____

Height: _____ (please be accurate)

Weight: _____

Male or Female (please circle)

_____ Yes I plan to attend the graduation service.

_____ No I am unable to attend the graduation service.

Please return this form along with the other forms in the packet.

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BEHAVIOR CONTRACT

For the good of the Summer Assembly Christian gathering planned for me and for the good of other youth attending from other churches, I agree to abide by the following:

- *I will be sensitive to the needs and respect the rights of each youth and adult.
- *I will refrain from behavior, which is disorderly or disruptive to other participants, and behavior that is unsafe or destructive to the college facilities.
- *I understand that participating in Summer Assembly will require a Christian effort from me, especially in adhering to "lights out" periods, staying out of "off-limit" areas, not leaving the college campus premises.
- *I understand that smoking, drug use, drinking, or possession of alcoholic beverages will not be tolerated and will be cause for immediate dismissal of the individuals involved.
- *I agree to participate fully in the Summer Assembly schedule.
- *I understand that we are not to bring media devices to class.
- *I understand that I am to conduct myself, at all times, as a Christian.
- *I understand that room assignments are made with deliberation and that I am to adhere to them strictly.
- *I understand that I am expected to follow the rules as outlined by the Director and staff.

Student Signature: _____ Date: _____

PARENT CONTRACT

My child, _____ may attend the Young People's Summer Assembly Program. I have received the information and behavior contract for participants and will cooperate as requested by the Summer Assembly staff in arranging prompt transportation home for medical or behavioral reasons.

Parent Signature: _____ Date _____

THIS IS TO BE SIGNED BY BOTH STUDENT AND PARENT AND RETURNED DURING THE INTERVIEW AND ORIENTATION.

PLEASE MAKE SURE TO RETURN:

1. MEDICAL SLIP
2. BEHAVIOR CONTRACT (**Please bring to orientation**)
3. INFORMATION PROFILE/REGISTRATION FORM
4. TRIP PERMISSION SLIP
5. GRADUATION INFORMATION (SENIORS ONLY)

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DIRECTIVES

- 1. RESPECT FOR AUTHORITY:** Each student is expected to show respect for Staff and college officials at all times.
 - 2. TIME:** is mandated. Meet your cluster leaders in the lobby area 10 minutes before breakfast, worship, or vespers. **NO VISITING AND SOCIALIZATION AFTER 12:00 midnight**
 - 3. ACCOUNTABILITY:** Student leaders in each group are responsible to the adults in your area; keep them and/or adults aware of where you are at all times.
 - 4. NOISE:** Talk to your friends. Keep the conversation low. Respect the rights and privileges of your fellow classmates and other dorm guests.
 - 5. DRESS CODE:** As young Christians, we represent not only our churches but also Christ. Young Men: No shorts other than recreation. No jeans/jean clothing of any kind, no bicycle shorts, **NO "T" Shirts, Suggested: dress shirts/tie and slacks.** Young Ladies: No shorts other than recreation time. No tank tops, No halter tops, T-shirts or revealing blouses, No short skirts, No short dresses and no jeans or jean clothing of any kind. **Suggested: modest length dresses or skirts and blouses and pantsuits.** Young Men & Ladies: **No tight fitting clothes of any kind are permitted. Clothing is to be worn appropriately!! No pants below the waist. No head attire is to be worn inside any classroom, building, etc....**
 - 6. MEAL TIME:** Each student is encouraged to eat at each meal and clean the area when completed.
 - 7. PROGRESS REPORTS:** A "Student Progress Report" will reflect your participation in classroom sessions, general assembly, class meetings, vespers services, and recreation activities. You are expected to attend each class. Attendance is mandatory for all events during the entire week.
 - 8. GUM CHEWING:** **No gum chewing in class and vespers.** **If you choose to chew gum at other times no one should be able to hear you!**
 - 9. FLOOR RESTRICTIONS:** **NO ONE LEAVES THE DORM AFTER 12:00 midnight.** Permission must be granted by the House Mother/Father in order to leave the floor. The Director must be consulted if they are not available. There will be no food ordered or delivered to the dormitory after 10:30 p.m.
 - 10. VISITORS** are restricted to vespers service only. **NO VISITORS IN ROOMS.**
 - 11 SOCIALIZATION:** **Please limit visiting to lounge areas on your floor. There is to be NO entertaining of the opposite sex in rooms.**
 - 12. ELECTRONIC MULTIMEDIA DEVICES:** **No "TV's" are permitted in rooms. CD player, IPOD's, MP3's, etc., are limited to use during free time and in the dorm rooms.**
 - 13. ROOM ASSIGNMENT:** All CHANGES MUST HAVE THE PERMISSION OF THE DIRECTOR. **You are responsible for keeping your room neat and clean..**
 - 14. ALARM CLOCK:** All Students are expected to bring an alarm clock. You will be responsible for waking up on time.
- Parents, Pastors and Churches will be notified immediately of violation of the rules. Student can and may be sent home for violation of the rules and regulations!!!**

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