

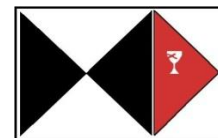


2016 NAPAD Youth Pre-Convocation

North American Pacific/Asian Disciples

August 2 - 3: Youth Leadership Program

Raynor Park Christian Church
1515 Partridge Ave. Sunnyvale, CA 94087



NAPAD Convocation August 3-6, 2016

Additional registration found at www.napad.net

Contact Information

First Name	Middle Initial	Last Name	Badge Name	
Address		City	State	Zip Code
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Home Phone	Parent's Work Phone	Parent's Cell Phone	Your Cell Phone	
Home Congregation/Organization		City	State	
Your Email Address	Gender	Birth Date	Preferred Roommate (Optional)	

Transportation Information **NOTE: the NAPAD office recommends that all attendees fly into the San Jose Airport (SJC)**

Arriving Airport	Airline & Flight #	Date	Time	Departing Airport	Airline & Flight #	Date	Time
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Health Information

Parent/Guardian's Name: _____

In case of emergency, please contact (Name): _____

Relationship to you: _____ (Phone #) _____

Insurance Carrier: _____ ID Number: _____

Physician's Name: _____

Known Allergies: _____

Medicine to be taken and dosage: _____

Covenant

I give my consent for _____ (name of participant) to attend the NAPAD Youth Pre-Event (and Convocation) and to participate fully in the program. During his/her absence, for the period of the conference and the travel to and from, the adults in charge have my permission to authorize medical and/or surgical treatment for my daughter/son in the event that I cannot be reached immediately for my permission. If any of the information on the registration form changes between now and the time of the NAPAD Youth Pre-Event (and Convocation), I will send updated information with my child.

Parent/Guardian Signature: _____

Deadline for Registration : July 15, 2016

Please send your **COMPLETED** registration form to:

Dr Geunhee Yu
NAPAD
PO Box 1986
Indianapolis, IN 46206-1986