

**National Association of Congregational Christian Churches (NACCC)  
NAPF and HOPE Registration Form**

**Portland, Maine ~ June 27<sup>th</sup>-July 2<sup>nd</sup>, 2020 (Saturday to Thursday)**

(A separate form must be filled out for each individual. Additional forms may be obtained from the NACCC Website ([naccc.org](http://naccc.org)) or you may duplicate this one). **Important:** Please print all information legibly.

I am registering for:		<b>NAPF</b>		or		<b>HOPE</b>	
(Circle one)		Completed Grade 8 through 12				Ages 19-26 or a high school graduate	
I am registering as:		____ NAPF Youth		____ NAPF Counselor		____ HOPE	
		____ HOPE				____ Planning Team Member	
Last Name		First Name		MI		Name to appear on nametag	
Address		City		State		Zip	
Phone Number				Youth Email Address			
Cell Phone number while traveling at conference				Age		Date of Birth	
Sex: M	F	T Shirt Size: S	M	L	XL	XXL	NAPF Only: Grade to be completed in 2020
						8 9 10 11 12	
Church Name				City		State	
I will be: ____ Driving ____ Flying ____ Traveling with my Church Group in a Van/Bus							
I will be traveling with the _____ (Church, state/regional group)							

**MEDICAL AND DIETARY INFORMATION**

**Failure to provide any of the following information may result in our inability to assist the registrant according to their medical needs.**

Is the registrant presently in good health and able to participate in all normal activities? YES NO <b>If no, please explain.</b>
Is the registrant presently being treated for any injury or sickness, or taking any form of medication for any reason? YES NO <b>If yes, please explain:</b>
List any drug allergies or other allergies:
May the NAPF registrant (under 18) take over the counter pain reliever if needed for headaches or pain? YES NO
Dietary restrictions:

**EMERGENCY CONTACT**

Name	Phone #	Relationship
Doctor's Name	Phone #	
Insurance Company	Policy #	Group#

In case of medical emergency, I understand that every effort will be made to contact the "emergency contact" listed above. If they cannot be reached, I hereby give my permission to the physician selected by the conference directors to hospitalize, secure proper treatment, and order injection, anesthetic, or surgery.

**Signature of Registrant** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature** \_\_\_\_\_ **(Parent or Guardian if under 18) Date** \_\_\_\_\_

Register online at [www.naccc.org](http://www.naccc.org) or return this Registration Form with appropriate Fee by April 1, 2020 Make Checks Payable to **NACCC**

Mail to: NAPF & HOPE, NACCC, P.O. Box 288, Oak Creek, WI 53154-0288

**The absence of any required signature will void this registration.**

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## NAPF and HOPE Code of Conduct for Participants and Leaders

Foundationally, there is an expectation that all actions and statements by all who are involved in NAPF – HOPE in any capacity will show respect for God, respect for others, respect for property, and respect for self. Further, that all participant's words and actions will reflect the two Great Commandments given by Jesus the Christ: Love God with all your heart, soul, and mind and Love your neighbor as yourself.

To be more specific: *the activities outlined below are strictly prohibited*. Any participant or leader who violates this Code is subject to discipline, up to and including removal from the conference. If a participant or leader must be removed from the conference due to inappropriate actions or comments and has received a scholarship, the scholarship will be revoked, and full payment for the conference must be made by the participant.

### PROHIBITED BEHAVIORS:

- Abusive language towards another participant or leader.
- Possession or use of alcoholic beverages or illegal drugs during the NAPF – HOPE CONFERENCE.
- Bringing dangerous or unauthorized materials such as explosives, firearms, weapons, or other similar items to the conference.
- Discourtesy or rudeness to a fellow participant or leader.
- Verbal, physical, or visual harassment of another participant or leader.
- Actual or threatened violence toward any individual or group.
- Conduct endangering the life, safety, health, or well-being of others.
- Bullying or taking unfair advantage of any participant.
- Failing to cooperate with the leadership of NAPF – HOPE.
- Leaving the conference site without express approval of Directors.
- Use of automobiles during conference.
- Inappropriate attire for a Christian conference. Shirts and T-shirts should always be worn by participants and leaders.

Further, all participants and leaders are expected to participate fully in all aspects of the NAPF/HOPE program. All participants and leaders are to respect the regulations of, including for smoking and property, the host institution.

**NOTE: *Harassment, intimidation, or bullying can take many forms including: slurs, rumors, jokes, innuendoes, demeaning comments, drawing cartoons, pranks, gestures, physical attacks, threats, or other written, oral, or physical actions.***

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**REPORTING POLICY OF INCIDENTS**

Should any violation of this code be observed, it should be reported to one of the adult conference directors/counselors. That leader should take appropriate action to address the situation, which may include involving another adult leader in talking with those involved.

The leader should make a written report of the incident and the resolution of it. This should be signed by all parties and dated. If there is a serious breach of conduct resulting in the removal of a participant, the adult leader should immediately contact the Executive Director of the NACCC to report on the incident. All written reports of conduct issues should be sent to the Oak Creek office as soon as the NAPF-HOPE conference concludes.

I have read, and I understand the details of this Code of Conduct. I agree to abide by the rules described above and understand that I may be removed as a participant if I violate any of these rules, and, if I have received a scholarship and been removed from the conference, the scholarship will be revoked and full payment for the conference must be made to the NACCC.

**Printed Name of Participant:** \_\_\_\_\_

**Signature of Participant:** \_\_\_\_\_ **Date** \_\_\_\_\_

*If under 18 years old,*

**Printed Name of Parent:** \_\_\_\_\_

**Signature of Parent:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Printed Name of Minister/Youth Director:** \_\_\_\_\_

**Signature of Minister/Youth Director:** \_\_\_\_\_ **Date** \_\_\_\_\_

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**PUBLICITY AND LIABILITY RELEASE**

**PUBLICITY RELEASE**

By signing this registration form the undersigned agrees to allow the possible use of photographs and/or verbal quotes of the attendee for published promotional materials including but not limited to direct mailings, advertising flyers and internet web site information and social media.

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**LIABILITY RELEASE**

I, \_\_\_\_\_, hereby acknowledge that I have voluntarily decided to participate in NACCC's NAPF-HOPE 2020 Meeting. As consideration for being permitted by NACCC and NAPF-HOPE to participate in these activities, I hereby agree that I, my parents, guardians, representatives and assigns will not make a claim against NACCC or NAPF-HOPE or any of its affiliated organizations, employees or representatives, for injury or damage to my person or caused, by an employee, agent, representative or contractor of NACCC or NAPF-HOPE or its affiliated, as a result of my participation in any NAPF-HOPE activities. In addition, I hereby release and discharge NACCC and NAPF-HOPE and its affiliated organizations, employees, agents, and representatives from all claims, actions or demands I, my parents, guardians, representatives, or assigns now have or may hereafter have for injury or damage resulting from my participation in these activities.

**Signature of Participant**

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*If under 18 years old,*

**Signature of Parent**

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Conference Fee: A Minimum **\$250.00** deposit of **\$520.00** total fee and Registration Form due in the NACCC Office by **April 1, 2020**.

**The balance of the registration fee (\$270.00) will be due on May 15, 2020**

**I am including a payment of \$\_\_\_\_\_ with the registration, which will leave a balance of \$\_\_\_\_\_.**

Late Registration of **\$620.00** will be charged for any registration postmarked **after May 15, 2020**.

**Space is limited – if registration is received after May 15, 2020 there is no guarantee your registration can be honored.**

**Conference fee** includes lodging, meals, and all program costs. Registration deposits are non-refundable but are transferrable.

**Scholarships are available – please check the NACCC website:**

**(NACCC.org)**

**Scholarship deadline is April 1, 2020**

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# REQUIRED FOR ALL ATTENDEES OVER 18



**Release Form for Background Check  
Clergy, Staff and Volunteer**

Background Check Contact: Laura Wright, [lwright@naccc.org](mailto:lwright@naccc.org)  
(800) 262-1620 ext. 1614 – Fax (414) 764-0319  
[naccc@naccc.org](mailto:naccc@naccc.org) – [www.naccc.org](http://www.naccc.org)

I, the undersigned, do hereby consent and agree that on behalf of its member churches the NACCC, through its designated agent Trusted Employee, have the right to perform a Nationwide Criminal Super Search, Social Security Trace Plus, Nationwide Sex Offender Registry Search, and Statewide/County Criminal Search. I authorize verification of all information in my employment application from all sources of employment, education, motor vehicle, criminal history, personal character, and worker's compensation records in accordance with ADA, labor and wage records, etc. or any part thereof, and authorize any duly authorized agent of Trusted Employees to obtain, whether the said records are public or private, and including those which may be deemed to be privileged or confidential in nature and I release all persons from liability as a result of such disclosures. Information appearing on this Authorization will be used exclusively by Trusted Employees for identification purposes and for the release of information which will be considered in determining any suitability for employment. I certify that I have made true, correct, and complete answers and statements on my employment/MIF application, or volunteer form, any supplements to it, and in any interview in the knowledge that they will be relied upon in considering my application for such employment or volunteer work, or call to be a minister of an NACCC member church. I agree to provide additional information that may be requested to process my employment/MIF application. I authorize without reservation, any party or agency contacted by Trusted Employees to furnish the above-mentioned information. This authorization is valid during the course of my employment to the extent permitted by law.

**Background Check Requested by:** (Church Name & Address) NAPF HOPE 2020

**Send results to:** (Name & Email address) \_\_\_\_\_

\*This request is for Employment \_\_\_\_\_ or Volunteer \_\_\_\_\_

**PLEASE PRINT LEGIBLY**

I hereby do \_\_\_\_\_ do not \_\_\_\_\_ authorize you to contact my current employer/church for Employment and Reference Verifications.

I hereby do \_\_\_\_\_ do not \_\_\_\_\_ authorize you to perform a background check using Trusted Employees.

I also understand that the NACCC is not responsible for any liability incurred as a result of my participation in this background search, including loss of job opportunity based on search results.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Legal First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Current Address (must incl. street, apt.#, city, state, zip code): \_\_\_\_\_

Gender: \_\_\_\_\_ Other names used/ Former last name: \_\_\_\_\_

Date of birth: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PO Box 288, 8473 South Howell Avenue., Oak Creek, WI 53154-0288  
| 414-764-1620 | 800-262-1620 | Fax: 414-764-0319  
Email: [naccc@naccc.org](mailto:naccc@naccc.org) | Website: [www.naccc.org](http://www.naccc.org)

*To nurture fellowship among Congregational Christian Churches and to support ministries of the local church in its community and to the world, all in the name of Christ*