



## CELEBRATE LIFE 2018 INFO SHEET

### Overview

Celebrate Life is a multi-day event which takes place each May at Olivet Nazarene University and which is designed to encourage the development and abilities of the Central Field NYI in the name of Jesus. Each year, thousands of students from all over the Central Field converge on ONU's campus to worship and fellowship together and to celebrate the gifts and talents God has given to them. It's a wonderful weekend of Christian community and a great opportunity for students to experience what ONU has to offer!

*Anyone* can attend the regional event as a spectator. However, only those who have qualified at the district level by being selected for a team event or receiving a qualifying talent entry evaluation will be able to participate in those events at the regional level. The process for selecting the teams and evaluating all talent entries takes place at Olivet Nazarene University on March 3rd. Both our team coaches and talent judges are encouraging and affirming and aim to provide constructive feedback for each participant.

Students may enter as many events as desired with two limitations:

- 1) No individual category may be entered more than once (e.g., a student cannot submit two paintings)
- 2) A student may only participate in a single team sport.

### Registration

To get a registration packet, ask your youth leader. The registration packet also can be found on the CCD NYI Facebook [page](#). All participants and leaders must be registered online no later than **Thursday, February 22nd**. Sponsors need not fill out registration forms for these events but will be required to fill out registration forms and background checks for the field event in May.

The cost for the District Celebrate Life event is \$10 which should be brought the day of the event. The cost includes a hearty lunch.



## District Celebrate Life Schedule

**Saturday, March 3rd // 8:30am-2:00pm // ONU Perry Center**

**8:30am - 9:30am:** Registration

**9:30am:** District Gathering @ Wisner Auditorium

**10:15am - 12:30pm:** Athletic Tryouts @ Perry Center

*Students registering for 5K, Home Run Derby, and Tennis automatically qualify for the Field Event in May. There are no tryouts for those events at the District level.*

**10:15am - 12:30pm:** Talent Tryouts @ Wisner Auditorium

**10:15am - 1:30pm:** Pool, Game Room, Rock Wall, NYI Olympic Challenge!

This year, in honor of the Olympics, we will have our own Olympic Challenge. During registration at the District event, students will be able to sign up for the events they'd like to participate in, such as the Rock Wall Challenge, Belly Flop Contest, etc. Great prizes are in store for our winners!

*Please note that a signed waiver is required to use the rock wall. Swimsuits are **required** for the swimming pool. No mesh shorts are allowed. Please use discretion in choosing your swimwear.*

**12:15pm:** Lunch

**1:45pm:** District Rally @ Perry Center

**2:00pm:** Head Home

## Field Event

May 10-12, 2018

Olivet Nazarene University

*You will miss two days of school to participate in the field event.*

If you have any questions regarding District Celebrate Life 2018, please feel free to contact me at [ccdnyl@ccdnaz.org](mailto:ccdnyl@ccdnaz.org) or 317-650-4343. I am assisting Brandon Carter as he takes on extra responsibilities at Kankakee First while Rev. Andrew Twibell recovers from his recent surgery. I'm looking forward to another great year!

David Morris

**Chicago Central District NYI President**



# CCD NYI Celebrate Life Registration Form

(Please PRINT and complete ALL information)

Date Of Birth: \_\_\_\_\_ District: Chicago Central District

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Grade: \_\_\_\_\_ Local Church: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Yr. Of Graduation: \_\_\_\_\_ Gender: M F

Cell Phone: ( ) \_\_\_\_\_

T-Shirt Size: \_\_\_\_\_

Cell Carrier: \_\_\_\_\_

I am a: \_\_\_\_\_ Participant \_\_\_\_\_ Sponsor

\*\*\* YOU MAY NOT ENTER ANY INDIVIDUAL CATEGORY MORE THAN ONCE\*\*

A. **Bible Quizzing**  Yes  No

B. **Video/Arts/Crafts**  
 Painting  Still Photography  
 Drawing  Sculpture & Craft  
 Video (individual only, not team)

C. **Science Quizzing**  Yes  No

\*Taped/CD music must be an original. All commercially produced accompaniment tapes must be an original tape (no copies will be permitted). Taped music must not have voices singing unison with the singer(s). The singer(s) will be judged by the written music given to the judges.

D. **Musical Talent: Instrumental**  
 (Circle One) Taped Live Accompanist  
 Solo  Duet  Name: \_\_\_\_\_  
 Trio Instrument(s): \_\_\_\_\_  
 Partner(s): \_\_\_\_\_  
 Keyboard  Piano  Organ  
 Solo  
 Ensemble Taped Live Accompanist  
 (4 to 11)    
 Ensemble Name: \_\_\_\_\_  
 Members: \_\_\_\_\_  
 Band Taped Live Accompanist  
 (12 or more)   Name: \_\_\_\_\_  
 Band Name: \_\_\_\_\_  
 Members: \_\_\_\_\_  
 Praise Band  
 Band Name: \_\_\_\_\_  
 Members: \_\_\_\_\_

E. **Musical Talent: Vocal**  
 Taped Live Accompanist  
 Solo   Name: \_\_\_\_\_  
 Duet    
 Partner: \_\_\_\_\_ Name: \_\_\_\_\_  
 Trio    
 Partner(s) \_\_\_\_\_ Name: \_\_\_\_\_  
 Ensemble    
 (4-11) Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Choir    
 Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Dist. Choir/    
 Impact Team Name: \_\_\_\_\_  
 Name: \_\_\_\_\_

F. **Communications/Video**  
 Creative Writing  Bible Exposition  Speech/ Reading  Video (Individual)  
 Drama Group Name: \_\_\_\_\_  
 Participants: \_\_\_\_\_  
 Mime Group Name: \_\_\_\_\_  
 Participants: \_\_\_\_\_  
 Puppetry Group Name: \_\_\_\_\_  
 Participants: \_\_\_\_\_

G. **Sport Events**  
 Video editing  
 Participant: \_\_\_\_\_  
 Assistant (Optional): \_\_\_\_\_  
 Basketball (District Team)  
 Free Throw Early Youth Senior Youth M F  
 Hot Shot Early Youth Senior Youth M F  
 Bowling  
 Chess  
 Table Tennis Mixed Doubles Singles M F  
 Tennis Early Youth Senior Youth M F  
 Volleyball (District Team)  
 5000-Meter Run  
 Home Run Derby Early Youth Senior Youth M F  
 Coed Soccer (District Team)

**Refund Policy:**

All monies received for the event of Regional Celebrate Life are non-refundable directly to the participant. They may, however, be transferred between participants within the district. I hereby agree to the stated refund policy.

\_\_\_\_\_  
 (Participant's Signature)

**Central Region NYI Celebrate Life**  
**PERMISSION - COOPERATION – INFORMATION FORM**  
(YOU MUST COMPLETE THIS FORM TO ATTEND)

***Parental Permission and Waiver of Liability***

I hereby give authority to \_\_\_\_\_ **David Morris** \_\_\_\_\_, who is the NYI President of the **Chicago Central** District, to obtain minor medical attention or to authorize treatment at any hospital in the event of a medical emergency.

I also recognize the authority of all district sponsors, the Celebrate Life staff and the security of Olivet Nazarene University as those who will supervise this event and uphold proper conduct. I understand that my son/daughter could be sent home and that I would be responsible for their transportation home and any destruction of property.

I will not hold the Church of the Nazarene or Olivet Nazarene University responsible for accident, injury or theft. My son/daughter has my permission to attend Celebrate Life.

\_\_\_\_\_  
(Parent or Guardian Signature) \_\_\_\_\_ (Month) \_\_\_\_\_ (Day) (Yr)

Home Phone #: (\_\_\_\_) \_\_\_\_\_ Emergency Phone #: (\_\_\_\_) \_\_\_\_\_

Work Phone #: (\_\_\_\_) \_\_\_\_\_ Contact: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy number: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

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**Teen Cooperation Agreement**

I am willing to cooperate with my sponsors, and I will submit to their authority in all areas. I will also follow the guidelines set up by the Central Region NYI Council and Olivet Nazarene University. I am aware that failure to do so will result in disciplinary action.

\_\_\_\_\_  
(Your Signature) \_\_\_\_\_ (Month) \_\_\_\_\_ (Day) (Yr)

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**OLIVET NAZARENE UNIVERSITY RECREATION FACILITIES**  
**ASSUMPTION OF RISK, RELEASE OF ALL CLAIMS, AND LIABILITY WAIVER**

**Notice:** This is a legally binding agreement. By signing this agreement you give up your right to bring court action or recover compensation or obtain any other remedy for any injury to yourself or your property or for your death however caused arising out of your use of Olivet Nazarene University Recreation Facilities now or anytime in the future.

**1. Recreational Activity** I have requested permission to use the recreation facilities of Olivet Nazarene University including, but not limited to, the climbing wall, exercise machines, exercise equipment, swimming pool, or Jacuzzi (collectively "Olivet Nazarene University Recreation Facilities") or to otherwise participate in recreational activities at Olivet Nazarene University including, but not limited to, exercise activities, weight training, recreational team sports, or individual recreational activity (collectively "Recreational Activity"). I hereby acknowledge and agree that my use of the Olivet Nazarene University Recreation Facilities and/or my participation in the Recreational Activity is completely voluntary on my part.

**2. Assumption of Risk** I hereby acknowledge and agree that my use of the Olivet Nazarene University Recreation Facilities and/or my participation in the Recreational Activity may expose me to significant risks such as cuts, scrapes, bruises, broken bones, concussions, other injuries, and even death. I further hereby acknowledge and agree that my use of the Olivet Nazarene University Recreation Facilities and/or my participation in the Recreational Activity may result in the loss or damage to my property including, but not limited to, clothing, shoes, and equipment. With full knowledge of the nature and extent of all risks to me or my property associated with my use of the Olivet Nazarene University Recreation Facilities and/or my participation in the Recreational Activity, I hereby voluntarily assume all risk of injury or death to my person and/or damage to my property while using the Olivet Nazarene University Recreation Facilities and/or while participating in the Recreational Activity.

**3. Release of All Claims** In consideration of being permitted to use the Olivet Nazarene University Recreation Facilities and/or to participate in the Recreational Activity, I hereby release on behalf of myself and my heirs, executors, administrators, and assigns Olivet Nazarene University and its trustees, officers, employees, and agents (collectively "Olivet") from any and all liabilities, claims, demands, causes of action, and costs and expenses which I or anyone on my behalf may have as a result of my use of the Olivet Nazarene University Recreation Facilities and/or my participation in the Recreational Activity.

**4. Indemnification and Hold Harmless** In further consideration of being permitted to use the Olivet Nazarene University Recreation Facilities and/or to participate in the Recreational Activity, I hereby agree to indemnify, hold harmless, and defend Olivet from any and all liabilities, claims, demands, causes of action, and costs and expenses, including attorneys' fees, which are asserted against or incurred by Olivet resulting from my use of the Olivet Nazarene University Recreation Facilities and/or my participation in the Recreational Activity.

**5. Effect of Agreement** I hereby acknowledge and agree that this waiver is intended to be as broad and inclusive as permitted by law and, if any provision of this waiver is held to be invalid or otherwise unenforceable, the enforceability of the remaining provisions of this waiver shall not be impaired thereby. This waiver shall be binding on me and my heirs, executors, administrators, and assigns and shall remain valid and in full force and effect for the entire duration of my use of the Olivet Nazarene University Recreation Facilities and/or my participation in the Recreational Activity.

**6. Health Certification** I hereby certify that I am in good health and that I have no physical limitations which would preclude my safe use of the Olivet Nazarene University Recreation Facilities and/or my safe participation in the Recreational Activity.

I HEREBY ACKNOWLEDGE AND AGREE THAT I HAVE READ THIS WAIVER, UNDERSTAND ITS TERMS, AND AM EXECUTING THIS WAIVER FREELY AND VOLUNTARILY.

\_\_\_\_\_  
Recreation Facilities user's signature                      Date

\_\_\_\_\_  
Recreation Facilities user's printed name

\_\_\_\_\_  
Parent or guardian's signature (if under 18)                      Date

\_\_\_\_\_  
Parent or guardian's printed name (if under 18)

\_\_\_\_\_  
ONU Staff signature                      Date

\_\_\_\_\_  
ONU Staff printed name