

NAME: \_\_\_\_\_

GRADE: 6th 7th 8th 9th 10th 11th 12th    MALE FEMALE

ONE PERSON I WOULD LIKE TO BE WITH: \_\_\_\_\_

I WAS INVITED BY: \_\_\_\_\_

IS THIS YOUR FIRST TIME TO ATTEND DNOW?    YES    NO

DO YOU ATTEND FIRST MCKINNEY?    YES    NO

SCHOOL \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

STUDENT CELL \_\_\_\_\_

PARENT CELL \_\_\_\_\_

SEND TEXT NOTIFICATIONS ABOUT DNOW 2022:    Student Cell    Parent Cell    BOTH

PARENT EMAIL FOR COMMUNICATING ABOUT DNOW- PLEASE PRINT CLEARLY:

PARENT/GUARDIAN NAME (PRINT PLEASE)

## DISCIPLENOW REGISTRATION

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## DISCIPLENOW REGISTRATION

### DNOW 2022 Schedule & Important Information

**Wed. Nov. 16, 7:00—8:00 pm:** YouthQuake @ the ROCK, everyone together

**Thurs. Nov. 17, 6:30—7:30 pm:** Group Reveal Rally in the Worship Center. Find out who is in your group, your group leader & your Host Home!\*

**Fri. Nov. 18, 6:30 pm:** Drop off your student at their Host Home. Make sure & eat before you come, bring everything you need for the weekend, & a snack and 2 liter drink to share! Check out the "What to Bring" list for details!

**Sun. Nov. 20. 11:45 pm:** Pick up your student & their luggage at the ROCK!

#### Other Details:

- Students must attend 2 of 3 sessions to attend DNOW (Fri. Night, Sat. Morning, or Sat. Night)
- Students must be at the Host Home by 11:30 pm on Friday Night or Saturday night if they need to attend a sporting event.
- Refunds: if a person must drop from DNOW, they can receive 50% refund until Wed. Nov. 16 @ 9:00 pm.

I give my consent to medical treatment and surgical treatment as needed in the judgement of the treating physician chose by the representative of FBC McKinney. I also give FBC McKinney and its representatives permission to transport my child at their discretion in case of emergency. I do hereby agree to hold FBC McKinney, their agents and employees harmless of any and all liability. Actions, causes of actions, claims, expenses, and damages on account of injury to my child(ren), property, even injury resulting in death, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities. Still photographs and video may be taken at this event. I give my consent for captured content to be used for broadcast and promotion of this event and similar event.

PARENT/GUARDIAN NAME SIGNATURE

\_\_\_\_\_, 2022

Date (month, day, year)

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