

APPLICATION

Application Deadline: Sunday, August 25, 2024 by Midnight Applications to be sent to info@ayministries.ca

This year, all qualifying Real McCoys can join us on an all-expense-paid trip, taking place on September 13-14, in Miramichi, NB. Our Real McCoys will have the chance to spend the weekend with our AY Committee.

Transportation will be provided while in Miramichi. Please let us know if transportation to/from Miramichi is an issue, and we will try our best to accommodate you.

To qualify as a Real McCoy, you must meet the following criteria:

- Those ages 12-17, must have raised/given a minimum of \$1000 to MTM during the 2024 campaign (if you are younger than 12 but are enrolling in the sixth grade in the Fall of 2024, you are eligible)
- Those ages 18-35, must have raised/given a minimum of \$2000 to MTM during the 2024 campaign.
- Attendees may be married, however, both husband and wife must be in attendance and must also be willing to stay apart in a room for guys and a room for girls, respectively. Attendees' children (if applicable) are not able to attend.

Please fill out the application below and do not leave any questions unanswered. If the question does not apply to you, fill in the blank with N/A and, if necessary, a brief reason why it doesn't apply. Filling out the following application means you do NOT need to fill out the form for UPCI Youth Ministries to be chosen to go to St. Louis for the National RM Weekend.

Please have your parents or pastor review this application before submitting it.

Namo:		
Name: LAST	FIRST	MIDDLE
Address:		
City:	Province:	Postal Code:
UPCI District:	Phone (Home):	Phone (Cell):
Email Address:		
DOB:		Male: Female:
Have you graduated H	igh School? Yes N	No
Father's Name:	Mother's Name	:
Other Guardian's Nam	e:	
Emergency Contact II Name:		Cell:
Name:	Relationship:	Cell:
Name: Christian Service Hist	Relationship:	Cell:
Name:Christian Service Hist	ory:	
Name: Christian Service Hist Name of the church you Pastor:	ory: ou attend: How long	
Name: Christian Service Hist Name of the church you Pastor: Pastor's Email:	ory: ou attend: How long Church Ac	have you attended?

Contest Criteria				
In which church related activities have you be	een involved? (check all that apply)			
Home Bible Studies Evangelism	Preaching Sunday School Teaching n Bus Ministry Small Group Leade Other			
List your district involvement (i.e. youth camp	o, youth conventions, etc.)			
List your UPCI Youth Ministries involvement:	AYC P7 Bible Club Bible Quizzing			
How much money did you personally raise fo	or MTM this year? \$			
Explain how you raised your offering and incle effort to reach your goal:	ude details on how you used creativity and hard			
Signature of Parent(s)/Guardian	Date			
Signature of Pastor	Date			

Date

Signature of Applicant

^{**}In order for the applicant to be included in the Atlantic District Real McCoy Weekend and to be considered for the UPCI Youth Ministries Real McCoy Weekend, this completed application must be returned to your District Youth President one week after the MTM offering date (deadline: September 1st, 2024)

REAL MCCOY WAIVER

The safety of your child is our primary concern. Precautions will be taken for their well-being and protection. This is a legal document. By signing this document you are agreeing to give up certain legal rights including the right to sue. You are also assuming certain obligations.

I hereby acknowledge that I/my child have/has voluntarily agreed to participate in the **REAL MCCOY WEEKEND 2024** (event) in **MIRAMICHI**, **NB** (location). Transportation during the event will be provided by Atlantic Youth Ministries. I also acknowledge that Atlantic Youth Ministries has provided me with pertinent information and details regarding **REAL MCCOY WEEKEND 2024** (event).

consequences. Notwithstanding members, directors, officers, lead suits, claims, demands, liabilities	n in REAL MCCOY WEEKEND 2024 (event) may have uthis, I hereby release and forever discharge Atlantic Youtders, agents, volunteers and employees from any and all in including negligence, and expenses I have now or may y involvement with or participation in this activity.	h Ministries and all affiliates actions, causes of action,
participant) hereby grant permiss	the parents/guardian ofsion for the above named student to participate in the RE c Youth Ministries and the Atlantic District from any and a	AL MCCOY WEEKEND
Youth committee members to sig	amed above, authorize Braden Brewer (District Youth Pre in consent for medical treatment and to authorize any phy or procedures for the participant named above should the	ysician or hospital to provide
Parent Signature		
Signature (if 18 or older)		
Printed Name	Date	.