

2009 National Bible Quiz Finals

Church Summary Page

Submit one summary page per church.

REGISTRATION FEES

Adult Quiz (per team):

- \$75 (x _____ teams) Early Registration (postmarked by May 11, 2009)
- \$125 (x _____ teams) Regular Registration (postmarked between May 12, 2009 and June 12, 2009)
- \$175 (x _____ teams) Late Registration (postmarked after June 12, 2009)

HCH5 @~ ssssssssssss

Team Quiz (per team):

- \$475 (x _____ teams) Registration Fee (postmarked by May 26, 2009)
- \$75 (x _____ teams) Late Registration Fee (postmarked on or after May 27, 2009)
- \$600 (x _____ teams) Meeting Room Rental Fee (Required for teams not staying at St. Louis Renaissance.)

HCH5 @~ ssssssssssss

Individual Quiz (per individual):

- \$125 (x _____ individuals) Registration Fee (postmarked by May 26, 2009)
- \$50 (x _____ Individuals) Late Fee (postmarked on or after May 27, 2009)
- \$100 (x _____ Individuals) Meeting Room Rental Fee (Required for individuals not staying at St. Louis Renaissance.)

HCH5 @~ ssssssssssss

Individual AIM Outreach Participation

- \$15 (x _____ individuals) Registration Fee (postmarked by May 26, 2009)

HCH5 @~ ssssssssssss



Grand Total: \$ _____

AAA (All registration fees combined)

TEAM LISTINGS

Please list all Team Quizzers.

Group Name _____
 TBQ Team Adult Quiz Team

Head Coach: _____

Assistant Coach(es): _____

Members _____

INDIVIDUAL LISTINGS

Please list all Individual Quizzers.

If additional space is needed, please attach typewritten lists of individuals or teams to this summary page.

AIM OUTREACH PARTICIPANTS

Please list all AIM Outreach Participants.

PAYMENT INFORMATION

Payment must be included with the registration form(s).

Please include all registration forms from your church with this summary sheet.

Pay to: national youth ministries/Bible Quiz

Check/Money Order # _____

Credit Card (American Express is not accepted)

Name _____
Must be exactly as it appears on the card

Billing Address _____

Card # _____ exp. _____ / _____
Must be the complete 16 digits on the front of the card Month Year

Total amount \$ _____

One check, money order or credit card payment must be sent in to cover entire church amount due.

Cardholder _____
 Signature _____ Date _____

Mail or fax completed forms, summary sheet and payment to:

national youth ministries
 ATTN: Bible Quiz
 1445 N. Boonville Ave.
 Springfield, MO 65802-1894

Contact us at:

Phone: 417.862.2781 x.4041
 Fax: 417.862.1693
 E-mail: bq@ag.org

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Registration Form

Forms must be typed or printed in black or blue ink. Each individual must fill out a form and obtain all applicable signatures.

1. REGISTRANT TYPE

Check all that apply:

- Adult Quiz Team Participant
- AIM Outreach Participant
- Bible Quiz Individual Participant
- Bible Quiz Team Participant
- Coach
- Official
- Parent/Minor/Guest (all attendees 10 years and older must complete a registration form.)

2. INDIVIDUAL INFORMATION

Name _____ Grade _____ Age _____ I am a Senior Quizzer
Last First 2009/2010 Please fill out Section 10 of this form.

Mailing Address _____
Number Street Apt. City State Zip

Parents' Names _____ Phone Number () - _____ E-mail _____
 Check if you do not wish to receive e-mail

I do not give permission for the personal information above to be given to any other AG institution, school or ministry other than nym and National Bible Quiz.

3. CHURCH INFORMATION

Church Name _____
Official Church Name Church City Church State

Mailing Address _____
Number Street Apt. City State Zip

Phone Number () - _____ E-mail _____ Sr. Pastor _____

My church would like to make a donation to the National Bible Quiz Scholarship Fund. Please send information to the church address above.

4. TEAM INFORMATION

Team Name _____ District _____ Region _____

Head Coach _____ Phone Number () - _____ E-mail _____
Last First

Mailing Address _____
Number Street Apt. City State Zip

Assistant Coach #1 _____ Assistant Coach #2 _____
Last First Last First

5. MEDICAL RELEASE AND CONSENT

Registrant's Full Name (Please print.) _____

I consent to full participation and assume full liability of hazard and risk for myself (or my child) during National Bible Quiz Finals and/or AIM Outreach. I certify that I am (or my child is) physically able to and adequately trained to participate in such events. I give permission for hospital or medical center staff to administer any necessary treatment immediately to me (or my child) should I (or he/she) be sick or injured during National Bible Quiz Finals and/or AIM Outreach. I do not hold the national youth ministries nor Bible Quiz nor AIM nor its respective officers and staff responsible for any injury as a result of my (or my child's) participation in the National Bible Quiz Finals and/or AIM Outreach.

Medications to which the registrant is allergic: _____

Is there anything in the registrant's medical history staff should be aware of in case of a medical emergency? _____

Emergency Contact _____ Emergency Phone () - _____
Last First

6. SIGNATURES

REGISTRANT SIGNATURE (required regardless of age) _____ Date ____/____/____

Your signature indicates that you have completely read and understand the Bible Quiz Rules, guidelines, medical release, AIM insurance election, model release and consent and will abide by them.

PARENT SIGNATURE (required for ALL registrants under 18) _____ Date ____/____/____

Your signature indicates that you understand and support your child's involvement in the National Bible Quiz Finals and/or AIM Outreach and will abide by all rules, guidelines, medical release, AIM insurance election, model release and consent.

PASTOR SIGNATURE (required for ALL Officials and Participants) _____ Date ____/____/____

Your signature indicates approval of this student's participation in National Bible Quiz and confirms he/she attends your Assemblies of God church or youth group.

COACH SIGNATURE (required for ALL Participants) _____ Date ____/____/____

Your signature indicates approval of these students' participation in National Bible Quiz and confirms he/she attends your Assemblies of God church or youth group.

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7. ADULT QUIZ TEAM PARTICIPANTS

Division Selection:

- Novice
 Veteran

8. BIBLE QUIZ INDIVIDUAL and TEAM PARTICIPANTS

2008/2009 Season Summary:

I was registered with the _____ District of the Assemblies of God. My Registration can be confirmed.

I was registered with _____ . It is an Assemblies of God church a Non-Denominational Church Other: _____
Church Name

- Highest level of competition attained: Placement at highest level:
 Leagues Individual _____
 League Finals Team _____
 District Finals
 Regional Finals
 Other: _____

- I received my National Memorization Award.
 I received my Master Memorization Award
 I am currently involved in the Royal Rangers ministry.
 I participated in my District Fine Arts Festival.
 My Fine Arts presentation advanced to the National Fine Arts Festival.
 I am willing to share my Fine Arts presentation during a 2009 National Bible Quiz morning service. Category: _____

Registration Selection(s):

- National One-on-one Tournament
 Individual Dramatized Quoting: Book _____ Chapter (one only) _____
 Preaching Ministry: Book _____ Chapter (one only) _____
 Senior Shoot Out
 Quoting Bee

9. OFFICIALS

History:

I am a current former quizzer with _____ . The highest level I attained was District Finals Regional Finals National Finals.
Church Name City State

	Judge	Number of years	Quizmaster	Number of years
District Finals	<input type="checkbox"/>		<input type="checkbox"/>	
Regional Finals	<input type="checkbox"/>		<input type="checkbox"/>	
National Finals	<input type="checkbox"/>		<input type="checkbox"/>	

2008/2009 Season Summary:

I have officiated at a league meet _____ times.

I have officiated _____ tournaments.

Availability:

- I am available to officiate: _____

10. SENIOR QUIZZERS

History:

- I have been quizzing TBQ for _____ years.
I quizzed at the national finals _____ years as a team participant individual participant
I have memorized _____ complete books.
I have received my National Memorization Award _____ times.
I have received my Master Memorization Award _____ times.

~~☞~~ Please e-mail a photograph of yourself to bq@ag.org.

~~☞~~ Please attach a typewritten sheet answering the following questions.

How has this ministry changed your life or helped you in your walk with Christ?

What are your plans for the fall of 2009?

What are your future plans?

Are you called into full-time vocational ministry, and if so, was it through your personal studies in the Bible Quiz ministry? Please Explain.

What other activities are you involved in at school, church or with another ministry?

- Curtis Scholarship Form Attached (form available on www.biblequiz.com)

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Do not turn this page in with your registration. This information should be kept by registrants.

11. AIM OUTREACH INSURANCE ELECTION

By checking the box for AIM Outreach (on p. 1 of this form) and subsequently signing the registration form you agree to the following:

I am aware of the hazards and risks to my child associated with serving in a missions capacity. I further understand that BQ and AIM currently require the insurance coverage summarized below, that the cost of the insurance is included with the outreach, that this coverage is subject to change, and that I am responsible for obtaining any additional insurance coverage that I consider necessary.

Stateside Trips—Special Markets Insurance Consultants, Inc.

- \$10,000 Accident Medical Maximum
- \$5,000 Sickness Medical Maximum
- \$2,500 Accidental Dental and Physical Therapy Maximum
- \$25,000 Accidental Death Benefit
- \$25,000 Accident Coma or Paralysis Benefit
- \$10,000 Medical Evacuation
- \$5,000 Repatriation
- \$5,000 Return of Remains

12. MODEL RELEASE

By signing the registration form you agree to the following:

I do hereby give National Youth Ministries, the General Council of the Assemblies of God, and any/all of their licensees and legal representatives the irrevocable right to use my (or my child's) name (or any fictional name), picture, portrait, or photograph in all forms and media and in all manners, including but not limited to, composite or distorted representations, for advertising, trade, or any other lawful purposes, and I waive any right to inspect or approve the finished product, including written copy, that may be created in connection therewith.

I verify that I am the parent/guardian of the minor name above or I am the non-minor registrant named above and have the legal authority to execute the above release. I have read this release and fully understand its contents. I approve the foregoing and waive any rights in the premises.