

BLAST

What: BLAST stands for Building Leaders and Sharing Talents. BLAST is held at both a district and field level. Students that participate in District BLAST have the opportunity to share their God-given talents in a competitive setting. There are a variety of areas for students to participate in; sports, art, writing, math, music, drama, and more. There are opportunities for both individuals and groups. The top-scoring participants are then selected to represent the East Ohio District at the Field BLAST event in the summer. Those students are then given the opportunity to participate in a competitive-setting against other students from the 8 different districts that make up our field. It is our goal and desire that through this event students experience training on the local level which will strengthen their relationships with Christ and encourage them to explore their potential as leaders in their churches and communities.

When: District- January 25th-26th, 2019
Field- June 6th-8th, 2019

Where: District- Friday night at Salem Community Center, Saturday at Leavittsburg Church of the Nazarene
Field- MVNU

Purposes:

- To promote the use of talents and gifts in local churches and communities.
- To give valuable feedback to students as they develop their gifts.
- To promote fellowship with Nazarenes across the district and field.
- To build leadership talents among students.
- To select the representatives from our district that will represent us at the Field BLAST event held at MVNU.

Contact:

BLAST COORDINATOR

Cassy Wynn
330-257-5622
cwynn9287@gmail.com



Building Leaders and Sharing Talents. Leadership is nothing more than using the talents God gave you to serve God, to serve the church and to serve the world.

- **Location:** Salem Community Center
1098 N Ellsworth Ave, Salem, OH 44460
Leavittsburg Church of the Nazarene
4175 Pendleton Rd. Leavittsburg, OH 44430
- **When:** January 25-26 2019
Registration starting at 5:30 PM Friday
Conclusion at 3:30 on Saturday
3 on 3 basketball tournament to be held April 6th, at 10am, more details to come
- **Who:** Students Grades 6-12
- **FEES:** Participant (GR 6-12) Registration: \$25 (Postmarked by 1/10/19)
Participant (GR 6-12) Late Registration: \$30 (Postmarked 1/11/19 – 1/24/19)
Adult Registration: Free
NO FRIDAY WALK-IN OR SATURDAY REGISTRATIONS!!!
- **What's Included:** Registration – All services, activities, swimming at community center
- **Food:** There will be concession stands at both locations
- **Housing:** Housing is not provided. Some churches drive home other stay in hotels. Please contact Cassy for recommendations on hotels.
- **Contact:** Cassy Wynn Cwynn9287@gmail.com or Cell: (330) 257-5622
- **MEDICAL RELEASE FORMS:** We must have a signed medical release form on file for all youth. No exceptions. Be sure to mail these forms along with your registration fees by registration deadlines.
- **HOW MANY ADULTS SHOULD WE BRING?** We are requiring a minimum of 1 adult per 6 students and one adult per gender. So, if you have 5 girls and 1 boy, you'll need both a male and a female chaperone. "Adult" is defined as over 20 years of age. Adults should also be trained and approved volunteers from your church. In the case that your church cannot provide a sponsor, it is your responsibility to assign responsibility to another church with their consent prior.
- **WHAT SHOULD WE BRING:** Yourself, Bible, Writing Utensil, Modest Swim Suit, towel and anything required for events you are participating in.

Naz Safe - All adult volunteers and/or chaperones, judges, coaches, etc., attending BLAST and all future district NYI events will need to be Naz Safe certified. If your church has a Naz Safe program in place, we will be able to accept your certification with a copy of your documentation. You will need to send me a copy of your certification papers and contact information for your church's Naz Safe administrator for verification. If your church does not have Naz Safe in place, you can be certified through the district and the application is attached for your convenience. The total cost for district certification is \$15 which includes \$10 for background check and \$5 for on-line video training. Checks can be made payable to EO NYI and must be included with the paperwork before the video training can be e-mailed to you. If you need Naz Safe certified, please don't wait until the last minute to send your application in. Those who have not completed this process will be unable to serve in an official capacity for BLAST or other district NYI events.

Registration Instructions:

- 1) Go to www.MVNU.edu/blast to register online.
- 2) Download District Group Registration form (Word Doc), fill out and email to Cwynn9287@gmail.com
- 3) Send waiver/registration form (both forms need to be filled out completely) and check to:
 Cassidy Wynn
 9316 12th St.
 North Benton, OH 44449
- 4) Make out one check for total registration fee payable to: "East Ohio NYI":

Tentative Schedule

FRIDAY @ Salem Community Center

- 5:30 Registration
(Arts/Craft and T-shirt design drop off during this time)
- 6:15 Opening Celebration
- 7:00 Athletic Events & Swimming at Salem Community Center
- 12:00 To hotels

SATURDAY @ Leavittsburg Naz

- 9:00 Opening Worship
- 9:30 Youth Break-out sessions and Youth Leader Training
- 10:30 Music/Creative Ministries/Academic Events
- 2:00 President's Report, NYI Elections & Awards
- 3:30 Depart for home

FRIDAY:

- Basketball
- Crafts
- Digital Photography
- Drawing
- Hotshot
- Painting
- Photography
- Poetry
- Prose
- Soccer
- Table Tennis
- Videography
- Volleyball

Friday - District Only:

- Dodgeball

If you are only signing up for Dodgeball, you are still considered a participant

SATURDAY:

- Chess
- Christian band
- Drama
- Human video
- Instrument Ens. Original Performance
- Instrumental solo
- Keyboard solo
- Math
- Praise band
- Preaching
- Puppets
- T-Shirt Design
- Vocal choir (10+)
- Vocal duet
- Vocal ensemble (3-9)
- Vocal solo
- Worship choreography (Interpretive Dance)

Regionals Only:

- 5K
- Tennis (singles)
- Archery

FIELD *BLAST* REGISTRATION FORM - 2019

Only for use in communicating to your BLAST leader. Field BLAST (June 6-8) registration must be done online at blast.mvnu.edu.

Please check one:

Participant (grade 6-12)

Adult

NAME: _____ **EMAIL:** _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **DATE OF BIRTH:** __/__/__ **GRADE:** ____ **GENDER:** Male Female

LEVEL Middle School (GR6-8) High School (GR9-12) **Adult T-shirt Size:** S M L XL 2X 3X 4X

LOCAL NAZARENE CHURCH (Church Name & City): _____

DISTRICT: EO EKY NCO NWO SCO SWO WVN WVS

Circle One: YES / NO *“I am participating in at least one of the events below that requires pre-registration.”*

Blank lines to the side of categories below are for group/team name

Christian Communication *(limit of 3 entries in this column)*

Vocal Music

- _____ Vocal Solo
- _____ Vocal Duet (_____)
- _____ Vocal Ensemble (_____)
- _____ Vocal Choir (_____)
- _____ Praise Band (_____)
- _____ Christian Band (_____)

Instrumental Music

- _____ Instrumental Solo _____ Piano Solo
- _____ Instrumental Solo Original Performance
- _____ Instrumental Ensemble

Writing

- _____ Prose _____ Poetry

Creative Ministries

- _____ Sign Language (**open at Field BLAST**)
(group/name: _____)
- _____ Drama (_____)
- _____ Puppets (_____)
- _____ Human Video
(group/name: _____)
- _____ Preaching
- _____ Choreographed Worship
(group/name: _____)

Art & Crafts

- _____ Crafts
- _____ Drawing
- _____ Painting
- _____ Photography
- _____ Digitally-Assisted Photography
- _____ Videography: Short Subject

Variety

- _____ Variety (**open at Field BLAST**)
(group/name: _____)
- (talent: _____)

Athletics / Games

- _____ Tennis - Singles (**open at Field BLAST**)
- _____ 5K Run (**open at Field BLAST**)
- _____ Archery (**open at Field BLAST**)
_____ Beginner _____ Advanced
- _____ Basketball Hot Shot
- _____ Basketball Team (_____)
- _____ Soccer Team (_____)
- _____ Volleyball Team (_____)
- _____ Chess
- _____ Table Tennis

Math

- _____ Mathematics (**open at Field BLAST**)

FIELD *BLAST* Fee Packages: *please check all that apply*

- | | | | |
|---|---------|-------------------------------|---------|
| _____ Participant (GR 6-12) Registration | \$60.00 | _____ Adult Registration | \$30.00 |
| _____ Participant (GR 6-12) Campus Housing | \$20.00 | _____ Adult On-Campus Housing | \$10.00 |
| _____ Participant (GR 6-12) Café Meal Package | \$35.00 | _____ Adult Café Meal Package | \$35.00 |

Total Fees = \$ _____ (Payment goes to your district leader. Check with him/her on who to make checks payable to)

BLAST MEDICAL & CIVIL LIABILITY RELEASE FORM - 2019

Required for each participant and adult leader.

Each attendee **MUST** complete the following Medical & Civil Liability Release Form.
For those participants under the age of 18, the parent or legal guardian **MUST** sign.

Signed copies of this form **MUST** be returned with registration information.
Individual registration is not complete unless the Medical & Civil Liability Release Form is on file with your district NYI.

FOR EVERYONE:

Name (Last) _____ (First) _____ (MI) _____
Address _____ City _____ St _____ Zip _____
Date of Birth _____ Gender _____

FOR PARTICIPANTS:

Parent/Guardian's Name _____
Phone # (Cell) _____ (Home or Work) _____

FOR ADULTS:

Emergency Contact _____ Relationship _____
Phone # (Cell) _____ (Home or Work) _____

MEDICAL INFORMATION:

List the name(s) and dosage(s) of any medications you will be taking while at **BLAST** 2019.

List any medications you are allergic to: _____

Date of last tetanus shot: _____

List any medical conditions or activity limitations: _____

Doctor's Name _____ Phone # (_____) _____

"I, _____, legal guardian of _____, authorize the
Parent/Legal Guardian *BLAST 2019 Participant*
leadership of **BLAST** 2019 to care for the administration of general first aid treatment for any minor injuries received to my child during the event. If the injury sustained is life-threatening, or in need of emergency treatment, I authorize the leadership of **BLAST** 2019 or its representative to summon any and all professional emergency personnel to attend, transport, treat my child.

I understand **BLAST** 2019 will require my son/daughter to make choices and keep a schedule, and that he/she may not be under direct adult supervision at all times. Unless there is negligence on the part of any staff or lay assistants of Nazarene Youth International Ministries, the General Church of the Nazarene, Mount Vernon Nazarene University, and/or **BLAST** 2019, I agree to release and hold harmless any staff and lay assistants of Nazarene Youth International Ministries, the General Church of the Nazarene, Mount Vernon Nazarene University, and/or **BLAST** 2019 from any and all claims, suits, costs and actions, of any kinds whatsoever, arising from their exercise of the power granted by this authorization.

This liability release is valid during Field **BLAST** 2019 (June 6-8, 2019) as well as during the _____ District **BLAST** event being held _____ 2019."

Signature of Parent/Guardian

Date

Student is covered by group or medical insurance: _____ Yes _____ No

If yes, complete the following information: NAME OF INSURED: _____

HEALTH INSURANCE COMPANY: _____

GROUP #: _____ POLICY #: _____

