

New Jersey Key Club's 69th annual

DCON

Discover the Magic of Service



2015 REGISTRATION PACKET

Daniel McCormack

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KEY CLUB®



Key Club International will be celebrating its 90th anniversary this service year. Since its inception in 1925, the organization is now represented in thirty-four countries around the world. Our organization takes pride in being the largest and oldest student-led, student-run service organization in the world. Throughout Key Club's history and throughout the mighty New Jersey District's history, Key Clubbers have accomplished some monumental and magical feats. In commemorating and reinvigorating the magic of service, we invite you to attend the New Jersey District's 69th Annual Key Club District Convention (District Educational & Leadership Conference). The New Jersey District Board hopes to guide its members in discovering the magic of service from this past service year as we revel in the beginning of a new one. You're invited to discover the magic of service the weekend of March 27th – March 29th 2015 at the New Jersey District's 69th Annual Key Club District Convention!

Enclosed in the other portions of this mailing you will find the following essentials pertinent for successful DCON Registration

- Annual Achievement Report Form in the Contests Packet: this form allows club members to participate in contests at DCON and allows clubs to be recognized for their accomplishments throughout the service year.
- Contests Packet
- Scholarships Packet
- Talent Show Flyer
- Key of Honor Flyer

and more!

Here are some helpful ideas and hints to help make your Registration Process run smoothly:

1. **Start planning with your Advisor and Administration as soon as possible.** Find a plan to help members pay. Determine if your club is able to subsidize a portion of the costs for some or all of your members to attend. If needed, ask your Kiwanis club for financial help as soon as possible.
2. If you need permission from your school principal, administrations, or Board of Education, please ask now. Do not wait until the week before.
3. Plan transportation now, especially if you need a bus from your school or an outside source. It may be easier to share with other area clubs. Contact your Lieutenant Governor to find out about the other clubs in your division's means of transportation.
4. Chaperones are mandatory for this trip. If chaperones need to be found, please start looking now. If you do not have a chaperone, please contact your respective Lieutenant Governor for assistance.
5. If you need to submit a voucher to your school, please do it early. If you need to get the New Jersey Key Club to sign it, send it to Daniel McCormack with a self-addressed stamped envelope to the address above. It will be signed and sent back to you. Allow enough time to meet the deadlines. This can be done without enclosing the money. With many more issues to consider, remember to read through the entirety of this packet and mailing to gain a full understanding of the registration process and district convention.

It is also worth noting that a new policy is being implemented for the 2015 District Convention. It is specifically stated in number thirteen (13) on the next page in the "Registration Guidelines." Please refer to that and contact us should you have any questions.

All of the enclosed information and the Elections and Scholarship Packets will be posted on the District web site: www.njkeyclub.org.

If you have any further questions, please contact your Lieutenant Governor, any member of the Kiwanis Committee, or myself.

Remember to start planning early! We look forward to seeing you at convention!

Daniel McCormack
Registration Chairperson

Samantha Levisay
District Governor

Ms. Kaitlin McCann
District Administrator

Mr. Peter Mollo
Financial Counselor

Registration Guidelines

1. **ALL REGISTRATION FORMS MUST BE POSTMARKED BY FRIDAY, MARCH 6th, 2015.** The prices are: \$270 for Key Clubbers and \$285 for chaperones (double occupancy room) or \$350 for chaperones (single occupancy room). If your club registers prior to Friday, February 13th, 2015, you may receive a deduction of \$5 per person. Registrations (check or school voucher) postmarked after February 13th CANNOT take the \$5 discount.
2. The Club's name and division MUST appear at the top of the page.
3. Please send a NON-REFUNDABLE check(s) or money order (NO CASH) made payable to:
"NEW JERSEY DISTRICT OF KEY CLUB."
4. Vegetarian dishes are included in the buffets.
5. Each club must have one chaperone for every 10 members. If your club is sharing chaperones with another club, it must be indicated on the registration form. You must include the complete contact information of the shared chaperone in order for us to confirm the arrangement.
6. Please indicate the positions held by the 2014-2015 club officers attending convention on the registration form. If elections for the 2015-2016 club officers have been held, please indicate this as well.
7. No incomplete forms will be accepted. Registration forms may be downloaded off of the New Jersey District website, www.njkeyclub.org in PDF Format. However, you may NOT register online. You MUST mail the forms in. Send the completed TYPED OR NEATLY PRINTED Registration Form and Convention Sign-up form with a check or money order to:

ATTENTION DCON

NJ Kiwanis District Office
120 Morris Avenue
Summit, NJ 07901

ATTENTION DCON

8. The Parental Consent Form and Medical Questionnaire and Emergency Medical Treatment Authorization Form should be turned in at the Convention Registration Desk upon arrival. (DO NOT MAIL THEM.)
9. The raised seal must be evident in order for emergency treatment. **THESE FORMS MUST BE NOTARIZED.**
An attorney's signature alone is NOT valid in New Jersey. Key Clubbers without necessary forms will not be permitted to stay.
10. Rooms containing less than four Key Clubbers may be consolidated with other clubs.
11. Once registration has been confirmed, refunds are not permitted. If someone is unable to attend and changes become necessary, contact someone in your club (of the same sex) and make arrangements for them to take that place.
12. By sending in the required forms and payment, you acknowledge all of the above procedures.
13. **NEW POLICY: Upon arrival at Ocean Place, ALL clubs MUST present a copy of the Registration/Payment email confirmation that was sent to the email address specified on the Registration Form. No club will be allowed to register without this email confirmation.**

Please note: If your club adds members later on, you will be required to submit a new rooming list, any adjustments to the chaperones attending (1 for every 10 Key Clubbers), adult address information and correct payment. All rooming decisions will be made at the discretion of the Convention Registration Committee Chairperson. All decisions are final. Any club who has not paid both International and District dues will not be permitted to attend the convention. If you have any questions, please feel free to contact Daniel McCormack, Convention Registration Chairperson, at nitreasurermccormack@gmail.com.

Adult Information for Emergency Use **(Required by New Jersey Law)**

To comply with New Jersey law, please print neatly the name, address, and home and work phone numbers of all adult chaperones who will be attending the Convention in the spaces below.

Key Club of _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Name _____

Address _____

Home Phone () _____

Work Phone () _____

Registration and Rooming Request Form

Key Club of _____ Division _____

Total number of persons registering:

- Male Key Clubbers _____ @ \$270
- Female Key Clubbers _____ @ \$270
- Male Chaperones (Double Rate)* _____ @ \$285
- Male Chaperones (Single Rate)** _____ @ \$350
- Female Chaperones (Double Rate)* _____ @ \$285
- Female Chaperones (Single Rate)** _____ @ \$350

*CHAPERONES INDICATING M OR F FOR "DOUBLE" WILL BE ROOMED WITH ANOTHER CHAPERONE OF THE SAME GENDER.

**"SINGLE" INDICATES THE CHAPERONE WANTS A "SINGLE" AT THE HIGHER RATE.

\$ _____ Total amount of check

If money order enclosed (# _____)

Note: All registration fees must be paid in full before Friday, March 6th, 2015. If registration is postmarked by Friday, February 13th, 2015, a discount in the amount of \$5 per attendee can be applied to the prices. Please designate a contact adult and student to answer questions concerning the club's registration.

Adult Name _____ Position _____
 Phone(_____) _____ Email _____ (for confirmation purposes)
 if you would like a hard copy confirmation check here _____

Student Name _____ Position _____
 Phone(_____) _____ Email _____ (for confirmation purposes)
 if you would like a hard copy confirmation check here _____

ADVISOR ROOMING:

- Please circle the appropriate designations – M F C D S (male, female, couple, double, single).
- Chaperones rooming with another adult from another school should list the other adult's name and school in parenthesis. If no name is listed and a chaperone requests a double room, they will be roomed with another chaperone of the same gender.
- Child rate for young children accompanying their parent chaperones:
 Age 4 & under - free; Age 5-11- \$130.00 (includes meals). Please list child's name, age, and gender on form.

ROOM # 1:

M F C D S Name: _____
 Name: _____

ROOM # 2:

M F C D S Name: _____
 Name: _____

ROOM # 3:

M F C D S Name: _____
 Name: _____

ROOM # 4:

M F C D S Name: _____
 Name: _____

ROOM # 5:

M F C D S Name: _____
 Name: _____

ROOM # 6:

M F C D S Name: _____
 Name: _____

PLEASE NOTE: CLUBS SHARING CHAPERONES WILL BE ROOMED WHEN THE LATER CLUB'S MATERIALS ARE RECEIVED.

KEY CLUBBER ROOMING

- Please place Key Clubbers in rooms of four. There will not be any rooms of five, as Ocean Place does not allow it. If you have less than four in a room, other key clubbers of the same sex may be placed in the room.
- Please indicate the positions of current club officers; President = P, Vice President = VP, Secretary = S, Treasurer = T, Editor = E. **If elections for the 2015-2016 club officers have been held, please place an asterisk (*) next to the officer designation.**
- For purposes of photocopying, please **TYPE OR PRINT** all registration materials.
- Feel free to copy this form if additional forms are needed.

Male Key Clubbers:

Officer

1. _____	_____
_____	_____
_____	_____
_____	_____
2. _____	_____
_____	_____
_____	_____
_____	_____
3. _____	_____
_____	_____
_____	_____
_____	_____
4. _____	_____
_____	_____
_____	_____
_____	_____
5. _____	_____
_____	_____
_____	_____
_____	_____
6. _____	_____
_____	_____
_____	_____
_____	_____
7. _____	_____
_____	_____
_____	_____
_____	_____
8. _____	_____
_____	_____
_____	_____
_____	_____
9. _____	_____
_____	_____
_____	_____
_____	_____

Female Key Clubbers:

Officer

1. _____	_____
_____	_____
_____	_____
_____	_____
2. _____	_____
_____	_____
_____	_____
_____	_____
3. _____	_____
_____	_____
_____	_____
_____	_____
4. _____	_____
_____	_____
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5. _____	_____
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6. _____	_____
_____	_____
_____	_____
_____	_____
7. _____	_____
_____	_____
_____	_____
_____	_____
8. _____	_____
_____	_____
_____	_____
_____	_____
9. _____	_____
_____	_____
_____	_____
_____	_____

CONVENTION SIGN-UPS

(This form must be typed or written neatly)

Sergeant-At-Arms

Each club must appoint two to four members to serve on this committee.

No committee member is exempt from any of the Convention Rules. Please select Sergeant-At-Arms carefully.

The Key Club of _____ in Division _____
does hereby authorize the following people as members of the committee on Sergeant-At-Arms.

1. Last Name _____ First Name _____
2. Last Name _____ First Name _____
3. Last Name _____ First Name _____
4. Last Name _____ First Name _____

Signature _____ Position _____

Delegates

The Key Club of _____ does hereby authorize the following member(s) to act as delegates.

1. Last Name _____ First Name _____
 2. Last Name _____ First Name _____
-

Judges

In the past, chaperones have served as judges in contests and one chaperone from any club with two or more chaperones will be required to help judge contests that occur during DCON. Please complete this section with the contact information of said chaperone.

Name _____ Key Club of _____

Address _____

Home Phone () _____

Work Phone () _____

_____ I am willing to serve as a judge for any contest.

_____ I would like to judge one or more of the following: (circle all that apply)

* Achievement	Oratorical	Essay	Talent	Scrapbook
* Single Service	* K-Relations	* Club Bulletin	* Theme and Major Emphasis	

* These contests will be judged in early March 2015.

Talent

Key Club of _____ Name of Act _____

Act Classification _____ Number of members involved _____

Equipment (check one): _____ club will supply _____ needed (if needed, please list)

Name _____ Date _____

*****Be sure to complete the Talent Contest Form if you are interested in performing*****

NEW JERSEY DISTRICT OF KEY CLUB INTERNATIONAL

2015-2016 CLUB OFFICER ROSTER

All clubs are expected to hold elections for the 2015-2016 service year prior to the District Convention. This is important so that the new officers can receive proper training at Convention. It is clearly beneficial for your club to have its new officers and advisors in attendance at the District Convention. **In order to attend District Convention, this form MUST be either mailed prior to or Turned in at the Convention Registration desk upon your arrival at Ocean Place. For those clubs not attending, please mail this form by March 12th, 2015.** We need this information to communicate with you. Return this sheet by mail to: NJ Kiwanis District Office, 120 Morris Avenue, Summit NJ 07901 or E-mail in a word document to kaitlin363@yahoo.com. You may download off the District Website.

Key Club of _____

Sponsoring Kiwanis Club _____

School _____

Address _____

Phone _____

Principal's Name, Email, and Phone Number _____

Office	Name	Street	City	Zip
--------	------	--------	------	-----

President

Phone No. (____)	_____	Email	_____	Grade	_____	Gender	_____
------------------	-------	-------	-------	-------	-------	--------	-------

Vice President

Phone No. (____)	_____	Email	_____	Grade	_____	Gender	_____
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Secretary

Phone No. (____)	_____	Email	_____	Grade	_____	Gender	_____
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Treasurer

Phone No. (____)	_____	Email	_____	Grade	_____	Gender	_____
------------------	-------	-------	-------	-------	-------	--------	-------

Editor

Phone No. (____)	_____	Email	_____	Grade	_____	Gender	_____
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Faculty Advisor

Phone No. (____)	_____	Email	_____	Grade	_____	Gender	_____
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Kiwanis Advisor

Phone No. (____)	_____	Email	_____	Grade	_____	Gender	_____
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PARENTAL CONSENT FORM

I, _____, do hereby grant permission for my son/daughter, _____, to attend the annual convention of the New Jersey District of Key Club International at Ocean Place Resort & Spa, Long Branch, New Jersey on March 27th – March 29th, 2015. I am aware of the rules of conduct governing this convention and I agree to release and hold the New Jersey District of Key Club International, the New Jersey District of Kiwanis International, and all chaperones and advisors completely and fully harmless from any obligation or responsibility.

I have discussed this agreement with my son/daughter and have made him/her aware of his/her responsibilities. I understand that should my son/daughter violate any rules of conduct, he/she will be sent home at my expense.

I also understand that no one other than me accepts any legal responsibility for my son/daughter.

SIGNATURE _____ DATE _____

HOME PHONE () _____ WORK PHONE () _____

IN CASE OF EMERGENCY, CONTACT _____

HOME PHONE () _____ WORK PHONE () _____

Sworn and subscribed before me this _____ day of _____, 2015.

_____, Notary Public of the County of _____

In the State of _____.

SEAL

My Commission Expires: _____.

Key Club Member: submit this form to your advisor. This form, as well as the Medical Questionnaire and Emergency Treatment Authorization Form, should be notarized and brought to the Convention Registration Desk upon arrival. No Key Club member will be permitted to attend convention without this form.

Key Club: _____

Last Name: _____ First Name: _____

MEDICAL QUESTIONNAIRE AND EMERGENCY MEDICAL TREATMENT AUTHORIZATION FORM

Please type or print. This form is required for all minors attending the New Jersey District Key Club Convention and must be completed by a parent or guardian. This form must be notarized with a RAISED seal and turned in at the Convention Registration Desk by your Faculty Advisor.

Key Clubber's Name _____ Height _____ Weight _____ Sex _____
Address _____
(Street) (City) (State) (Zip code)

Person to be contacted in case of emergency _____
Relationship to student _____ Home Phone () _____ Work Phone () _____
Alternate contact _____
(Name) (Relationship) (Phone)

Name of Doctor _____ Phone Number () _____
Doctor's Address _____
(Street) (City) (State) (Zip code)

Name of Health Insurance Co. _____ Policy Number _____
List any other pertinent information shown on insurance card _____

Please Answer Yes or No:

1. Will your son or daughter be taking drugs or medication of any type during convention? _____

2. Has he/she ever been treated for: (if currently being treated, please indicate)

A. Nervousness?	_____	H. High Blood Pressure?	_____
B. Any Mental Disorder?	_____	I. Severe or Frequent Headaches?	_____
C. Convulsions or Epilepsy?	_____	J. Asthma?	_____
D. Fainting Spells?	_____	K. Ulcers?	_____
E. Heart Condition?	_____	L. Diabetes?	_____
F. Rheumatic Fever?	_____	M. Allergic Reaction to Medication?	_____
G. Cancer or Tumor?	_____	N. Any Other Allergies or Illnesses?	_____

3. Does he/she have any other physical limitations? _____

Give details of yes answers to any of the questions above. Give dates of treatment, names, and addresses of attending physicians, hospitals, and clinics. (Use reverse side if necessary.)

Please Read Carefully:

I hereby certify that the information given above is correct. In case of medical emergency, I understand that every effort will be made to contact the person designated above. In the event that the person cannot be reached, or time does not permit, I hereby give permission to a licensed physician to provide proper treatment for, including hospitalization, immunization or injection, anesthesia or surgery for my son/daughter.

SIGNATURE OF PARENT OR GUARDIAN _____ DATE _____

Subscribed and sworn before me this _____ day of _____, 2015. SEAL

_____, Notary Public of the County of _____

In the State of _____. My Commission Expires _____.

NEW JERSEY DISTRICT KEY CLUB CONVENTION

RULES AND REGULATIONS

The following rules and regulations have been adopted to ensure the safety, comfort, and pleasure of all participants at the convention. Infractions of the Convention Rules will be reported to the Sergeant-At-Arms Committee and Kiwanis Committee members in charge and could result in dismissal from the convention, disciplinary action against any individual, and the loss of future convention privileges.

1. **NO** alcoholic beverages or drugs [not prescribed by a physician] will be permitted in the possession of any Key Clubber. The legal drinking age in New Jersey is 21 and the hotel will do everything in its power to protect itself and its business. **The hotel security staff has the OBLIGATION AND RIGHT to apprehend violators and turn them over to the New Jersey State Police.**
2. A retiring hour of 12:00 a.m. will be strictly enforced. Key Clubbers **MUST** be in their rooms at this retiring hour and remain there until 6:00 AM.
3. Caution should be taken not to deface any hotel or personal property belonging to another individual or club. Everyone is responsible for their own room as well as the consequences of their own actions.
4. Gambling, the use of fireworks, water fights, etc. is unacceptable. In brief, any improper behavior will not be tolerated, and may result in the dismissal of an individual or club with the possibility of awards revoked for rule infractions.
5. Smoking will not be permitted by anyone at **ANY TIME** during the convention.
6. Attendance is mandatory at all General Sessions, Caucuses, and Workshops. No participants should be in their rooms, hallways, or any other area during these meetings.
7. Appropriate dress (collared shirt, tie, and dress slacks for males; dress outfits for females) is required at all meals, meetings, caucuses, workshops, and House of Delegates. For males, jackets are recommended. **NO** sweatshirts, T-shirts, jeans, shorts, beachwear, athletic footwear, and sneakers are permitted at above session; unless otherwise noted by the New Jersey District. Neat dress is in order at all times. Please note that this regulation applies to **all** attendees of the New Jersey District Key Club Convention, **including advisors and chaperones.**
8. Any and all fundraising by clubs or individuals is strictly prohibited during the entire convention, with the exception of District Board sponsored fundraising projects.
9. The New Jersey District will not be responsible for damage to personal or club property during the convention or cost of sending Key Clubbers **HOME**.
10. No female Key Clubber will be allowed in the room of a Male Key Clubber, and no male Key Clubber is allowed in the room of a female Key Clubber, unless an adult advisor is present.
11. The chaperone requirement is one adult advisor (21 or over) per 10 Key Clubbers. Clubs with both male and female members should have both male and female chaperones. Schools wishing to share chaperones should make the arrangements prior to registering, so they can be roomed together. Please indicate on the registration form if you are sharing chaperones.
12. Every member will respect the authority of the Sergeant-At-Arms Committee.

ADVISORS ARE EXPECTED TO REVIEW THESE RULES WITH KEY CLUBBERS! WE ALSO ASK ADVISORS TO SET AN EXAMPLE BY FOLLOWING THE ABOVE RULES.

Key Clubber's Signature

Parent's Signature

** Please note that signing the above lines implies that the Key Clubber agrees to obey the aforementioned rules and acknowledges that violations of these rules can result in the ejection of the Key Clubber from the New Jersey District Key Club Convention. The Parent/Guardian acknowledges their obligation to provide transportation back from the Convention center if a violation or ejection occurs. **