



LION OF JUDAH MINISTRIES

(NON-PROFIT ASSOCIATION INCORPORATED UNDER
SECTION 21)

REG No: 21/2013/0161

R.O.A.R. Camp Application Form

Affix Head &
Shoulder
PHOTO
of yourself in
this space.



Dear Participant,

1. Please complete all aspects of this form, scan & email to: the-registrar@lionofjudahmin.com to facilitate smooth processing.
2. Fields marked with * are mandatory and please mark with an 'x' where applicable.
3. This form is only valid with a Head & Shoulder (passport size) photo of yourself affixed to it.
4. A **non-refundable deposit** of **N\$350.00** is required to confirm your registration into the following account:
Bank: Standard Bank Namibia
Branch number: 086 872 (Maerua Mall / Grove Mall)
Account name: ROAR
Account number: 569 376 920
Reference: Your Initial & Surname
5. Total Camp Fees for this camp are **N\$700.00**.
6. Please read the Terms and Conditions document for the R.O.A.R. Camps & Trainings.

Camp Date: ____ / ____ / ____

Personal Details:	* All fields required
Full First Name(s)	
Surname	
Gender	Male: ☐ Female: ☐
Date of Birth	
Your T-shirt size	X-Small: ☐ Small: ☐ Medium: ☐ Large: ☐ XL: ☐ 2XL: ☐
Tel number (H)	
Mobile	
Email address	
Next of Kin Name (Please state PRIMARY relative only!)	(Father / Mother etc & Name)
Contact number (Next of Kin)	
Email address (Next of Kin)	

Church Affiliation:	(If you do not attend a church, please place N/A in the affected field)
* What Church do you attend?	
Pastors Name & Surname	
Pastors Contact number	

Medical Information:

1. * Please select as applicable:

Medical Condition	X	Medical Condition	X
No Medical Issues		Cardiac problems (Please list below)	
Asthma		Any Chronic Illness (Please list below)	
Back or Spinal Injuries		Combination of problems (Please detail below)	
Diabetes		Other (Please list separately below)	
Knee or other joint injuries / problems			

2. Please detail below if you answered any of the last 4 options above or any other condition not listed:

3. Please list any medication that you are currently taking and the purpose thereof:

DISCLAIMER:

I declare that the information given above is true. I acknowledge that I understand the programme requirements for which I (or my son / daughter in case of a minor) have applied and that there is a non-refundable deposit of N\$250 payable.

I herewith, in the submitting of this application form, declare that I have read, understood and agree to the Terms and Conditions as laid out in the document "R.O.A.R. T&Cs.pdf."

These Terms and Conditions are binding once this registration form is signed, irrespective whether such has been read or not.

Full Name: _____
(Applicant or legal guardian)

Signature: _____

Date: ____ / ____ / ____