

**SEJ BLACK METHODISTS FOR CHURCH RENEWAL, INC.**  
**YOUTH HARAMBEE**



**#RISE UP**

**Equip, Empower, Engage, Encourage**

***"For though they fall seven times, they will rise again; but the wicked are overthrown by calamity." Proverbs 24:16 NRSV***

**Deadline for registration  
with  
Western NC BMCR  
is April 20, 2023.**

**Contact  
Tina McLendon  
704-363-1222**

**JUNE 21-25, 2023**

**Clafin University  
Orangeburg, South Carolina**

# READ UP!

## WESTERN NC REGISTRATION DEADLINE IS APRIL 20, 2023

- **REGISTRATION COVERS:** On-Campus Housing (Wednesday-Saturday nights); meals from Wednesday (Lunch) through Saturday (Dinner); programs and activities both on and off Campus. A grant has been provided to assist 50 registrations.
- A \$25.00 refundable key deposit will be collected on site from ALL participants and chaperones. Please DO NOT include the key deposit in your registration, it must be provided in CASH during Registration and will be refunded upon return of room key.
- **NO ONSITE REGISTRATION!** Cancellation request must be in writing and emailed to the coordinator for approval. No refunds will be approved after June 3, 2023. Any requests approved for refunds that meet SEJ-BMCR Youth Harambee guidelines will be mailed 30 days after the conference ends. **NO EXCEPTIONS!** Participants should ensure that all forms are signed by the appropriate persons. Registration will be considered incomplete if forms are not signed by all designated persons.
- **HOUSING: ALL HARAMBEE** Youth and Adult Chaperones will be housed in campus dormitories. Chaperones, please send a rooming list with participant registration forms. Adult supervision and security will consistently monitor the area to ensure that participants are safe.
- **BRING IT!** - Stuff You Need: Come with an open mind and loving heart. Bring Bibles, at least one trash bag, personal toiletries (soap, lotion, deodorant, etc.), bed linens or sleeping bag, pillow, towels, shower shoes, casual clothes, swim wear (**participants will be informed if there will be a pool available**), dressy attire for Harambee Academy Awards and Talent Show.
- **WEAR IT!** - Name Badges - **Always wear your name badge.** It is your identification for all conference activities, including meals, workshops, and on/off campus activities.
- **DON'T DO IT! NO EXCEPTIONS!** - "Ain't Misbehavin'" - The United Methodist Church does not condone the use of alcohol or illegal substances, nor will acts of disorderly, rude, or inappropriate behavior be tolerated. Youth found in violation by using or possessing illegal substances will be sent home at their parents/guardian expense - No refunds will be issued. Youth who are not a part of the conference will not be allowed into conference activities without express permission of the SEJ BMCR Harambee Coordinator. Youth leaders/chaperone are responsible for their youth and must enforce the curfew, as well as the rules and regulations of the conference. **NO EXCEPTIONS!**
- **YOUTH LEADERS AND CHAPERONS** - To ensure we experience a great conference, each youth group should send no more than 1 adult for 1 to 5 youth, 2 adults for 6 to 10 youth, 3 adults for 11 to 15 youth, etc. Minimum age for adult chaperones is 21. **All youth must be accompanied by a chaperone. Male youth MUST have a male chaperone designated and Female youth MUST have a female chaperone designated.** If you have a single participant, please try to connect them with another local church if possible. (All chaperones must have a completed Safe Sanctuary Form signed and approved by their pastor.

- **SECURITY PERSONNEL – WATCHING OVER YOU!** - Security will be available throughout the conference. If you have a problem, do not hesitate to ask for assistance.
- **MISSION PROJECT** - Our Mission Project this year will be to provide Blessing Bags for donation to Adult Day Care Centers and College Food Pantries. Items such as toilet paper, paper towels, adult diapers, sanitary napkins.

**MAIL ALL COMPLETED FORMS TO:**

Tina Jackson-McLendon  
4509 Mendham Drive  
Charlotte NC 28215

Contact Information: (704) 363-1222; [tinajmclendon@aol.com](mailto:tinajmclendon@aol.com)

## DAILY SPEAKER

### REV. DR. VANCE P. ROSS



Pastor Vance P. Ross was appointed to serve as the senior pastor of Central United Methodist Church, Atlanta, Georgia, in 2018. A native of Bluefield, WV, Rev. Ross has a Bachelor's degree from West Virginia Wesleyan University; a Master of Divinity degree from Gammon Theological Seminary (Atlanta); and a Doctor of Ministry degree from United Theological Seminary (Dayton, OH). Ross served on the leadership team of the General Board of Discipleship (Nashville), returning a few years later when that agency was re-organized as UM Discipleship Ministries. His work focused on working with annual conference leaders to build and strengthen the core process of disciple making in local church ministries. From 2011 to 2015 he served as Senior Pastor at Gordon Memorial UMC, Nashville, an urban church of 1100 members. During his tenure, worship attendance grew significantly, and the church as cited for its evangelistic outreach. Pastor Ross also served First UMC, Hyattsville, MD, leading this multicultural church as it established a second campus, offered multiple bible study classes, ESL classes and Spanish-language worship services.

Vance's current appointment, Central UMC, Atlanta, prides itself as "the church at the heart of the city with the city at heart." According to the church's website, "some of the most progressive and aggressive movements for racial equality were engendered by and through Central. The church helped mold the civic and religious character of Atlanta as the city evolved into the southeast's leader educationally and industrially, as well as the hub for civil rights activism."

Vance has received numerous honors and awards, including the Isaac R. Clark Preaching Award at Interdenominational Theological Center (twice); Vision Awards from the Convocation of UM Black Churches (twice), a servant leader award at Clark Memorial Church, Nashville and a Citizen's Award from Hyattsville's City Council.

Dr. Ross is a contributor to the recent publication *I'm Black. I'm Christian. I'm Methodist*. Edited by Rudy Rasmus (Abingdon, 2020).

He is married to the Rev. Bridgette D. Young Ross, recently retired Dean of the Chapel and Spiritual Life at Emory University, Atlanta, GA. He has three adult children: Kristina, Alyssa, and Bryant. He has two grandchildren, Christopher, and Jaylie.

## **FIRST DAY IS WEDNESDAY, JUNE 21<sup>ST</sup>**

**Registration: 12 Noon - 5 p.m.**

**Opening Worship: 7 p.m.**

## **CHECK-OUT SUNDAY, JUNE 25<sup>TH</sup>**

**All groups will be given a check-out time.**

**WHO CAN ATTEND?:** Rising 7th graders through 2023 high school graduates (ages 12-18) and adult chaperones. Due to the insurance coverage concerns, no youth under the age of 12 are permitted to attend.

**WHAT IS HARAMBEE?** HARAMBEE is a Youth Conference planned by the HARAMBEE Planning Committee under the guidance of the Executive Board of the Southeastern Jurisdiction Black Methodists for Church Renewal, Inc. The conference is held annually to help youth develop their spiritual, leadership and interpersonal skills. In doing so, youth will begin to develop relationships, connect with each other, and learn how to bridge the gap from generation to generation. The Conference will also help youth, as well as adults, explore what it really means to pull together and work together in Christian love. Come to work, play, sing, and build meaningful relationships with God and each other.

**WANT TO KNOW MORE?** If you want to know more about HARAMBEE, be added to the HARAMBEE mailing list, or explore working with the HARAMBEE Leadership Team, please contact Audrey Pankey, Coordinator at [audrey.pankey@yahoo.com](mailto:audrey.pankey@yahoo.com) or Koneisha Timmons, Registrar at [sejyouthharambee@gmail.com](mailto:sejyouthharambee@gmail.com) Please reference “SEJ BMCR Harambee” on the subject line.

# YOUTH HARAMBEE REGISTRATION FORM

Print and complete all information. Your Pastor/Youth Coordinator **must** sign below. Mail certified check or money order for T-shirt, registration form, medical form, and covenant agreement to:

Tina Jackson-McLendon  
4509 Mendham Drive, Charlotte NC 28215

THE REGISTRATION INCLUDES HOUSING, MEALS, PROGRAM, AND ACTIVITIES.  
3X OR LARGER T-SHIRTS WILL COST AN ADDITIONAL \$4.00 PER SHIRT.

## Registration: (Youth/Participant and Chaperones)

Full Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Youth/Participant E-mail Address: \_\_\_\_\_

Parent/Guardian E-mail Address: \_\_\_\_\_

Youth Cell# ( ) \_\_\_\_\_ Parent/Guardian Cell # ( ) \_\_\_\_\_

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## PASTOR'S RECOMMENDATION

*I recommend the above-named youth for attendance at the 2023 SEJ BMCR Youth Harambee.*

Pastor's Name (printed): \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Church Name: \_\_\_\_\_ District: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**ANNUAL CONFERENCE (PLEASE CHECK ONE)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Alabama/West Florida | <input type="checkbox"/> Florida                    | <input type="checkbox"/> Holston                |
| <input type="checkbox"/> Kentucky             | <input type="checkbox"/> Mississippi                | <input type="checkbox"/> North Alabama          |
| <input type="checkbox"/> North Carolina       | <input type="checkbox"/> North Georgia              | <input type="checkbox"/> Red Bird               |
| <input type="checkbox"/> South Carolina       | <input type="checkbox"/> Tennessee Western Kentucky | <input type="checkbox"/> Western North Carolina |
| <input type="checkbox"/> Virginia             | <input type="checkbox"/> South Georgia              |   |

**Is This Your 1<sup>ST</sup> Year Attending Harambee?**                       YES                       NO

Select T-shirt size: (Please Circle):

**S M L XL 2XL (3XL, 4XL = \$4 extra)**

**If applicable, enclose the extra cost for a 3XL or larger T-shirt (\$4 each, money order or cashier's check, payable to SEJ BMCR).**

**Total Enclosed**                      \$ \_\_\_\_\_

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**CHAPERONS** - To ensure we experience a great conference, each youth group should send no more than 1 adult for 1 to 5 youth, 2 adults for 6 to 10 youth, 3 adults for 11 to 15 youth, etc. The minimum age for adult chaperones is 21years of age.

**All youth must be accompanied by a chaperone. Male youth **MUST** have a male chaperone designated and Female youth **MUST** have a female chaperone designated.**

If you have a single participant, please try to connect them with another local church if possible. (All chaperones must have a completed Safe Sanctuary Form signed and approved by their pastor.

Chaperone Information: (Please Print)

Name: \_\_\_\_\_

Phone # (cell): \_\_\_\_\_

**PLEASE REMEMBER: CHAPERONES MUST BE GENDER SPECIFIC (FEMALES FOR FEMALES AND MALES FOR MALES).**

# HARAMBEE! 2023 COVENANT AGREEMENT

## THIS COVENANT AGREEMENT MUST BE SIGNED BY YOUTH, PARENT/GUARDIAN AND ALL PARTICIPANTS

The HARAMBEE Youth Conference is a community of persons coming together to experience relations in a diverse group of youth and adults, and to proclaim the wonder and beauty of God through song, dance, scripture, lectures, workshops, and recreation. Our life together is so important that we call all participants and leaders to enter a covenant together regarding the mutual responsibilities we all share.

Being in covenant means we each honor our life together as a Christian community and it means that we take seriously the admonition to beware of becoming an obstacle to anyone at this conference. It means we enter into a binding solemn agreement with each other and our God.

We are bound together as the family, seeking first the good of each other. Each of us must, there, support HARAMBEE with the best of our abilities, time, presence, and prayers. Surely then God will add the increase. The following statements will provide guidance for our lives together in covenant as participants and leaders of HARAMBEE.

1. Each of us comes with an open mind, a loving heart, and a willing spirit, and each of us comes needing things from each other.
2. Participation in all activities (prompt, orderly, and thorough attendance is in the best interest of the community and is expected of all participants).
3. We will respect the purpose of our coming together for Youth Harambee.
4. Each of us will speak to others, as we would like to be spoken to by others.
5. We will respect the property of each person, and or those persons and organizations that host us.
6. We recognize the body is a temple of God and will be guided by the Holy Spirit always, asking ourselves, "Would Christ be pleased?" with how we treat ourselves.
7. The possession or use of tobacco, alcoholic beverages, illegal drugs, fireworks and/or firearms is prohibited in all YOUTH HARAMBEE activities. Persons found in violation of this rule will be dismissed from Youth HARAMBEE. Harambee staff will contact parent or guardian and ask them to make arrangements at their own expense for getting their youth home. In the case of alcohol, drugs, fireworks, or firearms, the local police will be notified.
8. While on the campus or facility of host institute, each participant and leader will respect the rights of others for quiet and undisturbed rest. Each will be aware of the need for safety and follow all the rules outlined by the program sponsors.
9. All Curfew times will be honored.

**We affirm the above Covenant Agreement**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Print Name of Youth**

\_\_\_\_\_  
**Print Name of Parent/Guardian or Participant**

\_\_\_\_\_  
**Signature of Youth**

\_\_\_\_\_  
**Signature of Parent/Guardian or Participant**

# SEJ BMCR YOUTH HARAMBEE MEDICAL RELEASE/PERMISSION FORM

Print and complete all lines. This form **must** be signed by parent/guardian or participant. Mail along with Registration Form and Covenant Agreement to Tina McLendon.

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Youth/Participant Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home Phone (    ) \_\_\_\_\_ Cell Phone (    ) \_\_\_\_\_

Secondary contact name and phone number to notify in event of an emergency:

\_\_\_\_\_

Tel: (    ) \_\_\_\_\_

Secondary contact relationship to youth/participant: \_\_\_\_\_

Please complete **ALL** medical insurance below and attach a copy of the insurance card front and back.

Name of Medical Insurance Company: \_\_\_\_\_

Group # \_\_\_\_\_ Policy #: \_\_\_\_\_

Insurance Company Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list any medical conditions such as Asthma, Diabetes, Allergies, Heart related, Allergies to medications, rare blood type, use of contact lenses, etc. and/or any special instructions or accommodation needs (room on ground level, etc.).

\_\_\_\_\_  
\_\_\_\_\_

List all medications taken on a regular basis: \_\_\_\_\_

\_\_\_\_\_

**The above health history is correct to the best of my knowledge. The person described herein has permission to engage in all prescribed activities except those noted.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian or Participant



## **EMERGENCY AUTHORIZATION**

**I hereby give permission to medical personnel selected by SEJ BMCR Youth Harambee designee to order x-rays, routine tests, and treatment for the youth/participation, in the event of an emergency.**

**I hereby give permission to the physician selected by SEJ BMCR Youth Harambee to hospitalize, secure proper treatment, order injections and/or anesthesia and/or surgery.**

**I further authorize the release of the above medical information to the appropriate medical personnel. In addition, I have, and do hereby, release SEJ BMCR Youth Harambee, and its agents from liability associated with participation in SEJ BMCR Youth Harambee activities.**

**I understand that if I do not have medical insurance, I, as the participant/parent or guardian, will be responsible for any medical expenses in the event of sickness and/or injury.**

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**Print Name - Parent/Guardian or Participant**

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**Signature – Parent/Guardian or Participant**

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**Date**