



WFD YOUTH CAMP APPLICATION
Deaf Youth Renaissance
July 6 -14, 2011
Durban, South Africa
Karridene Protea Holiday Resort

The World Federation of the Deaf (WFD) Youth Camp provides international leadership training opportunities to deaf and hard of hearing youth. Youth leaders from all over the world will congregate in Durban, South Africa to share ideas, learn a wide range of topics, grow as individuals, and understand the principles of leadership through intellectual, emotional, social, and cultural development.

WFD Youth Camp Objectives:

- To train and develop organizational and leadership skills
- To facilitate networking among Deaf Youth
- To experience cultural exchange

Every four years, national associations of the deaf/youth organizations can select up to four participants (2 participants and 2 alternates). Of the four participants selected, two will be chosen to as delegates for the Youth Assembly at the WFD Youth Camp. For a week, camp attendees from various countries will interact and engage in a dynamic, open dialogue of ideas and suggestions based on their experiences, including workshops and presentations coordinated by the WFD Youth Camp Committee and the WFD Youth Section Board (www.wfdys.org). After the camp, the four participants will attend the WFD World Congress, also in Durban, July 18 – 24, 2011.

The WFD Youth Section is committed to the civil, linguistic, and human rights of deaf youth all over the world. Our international camps are a place where deaf youth from all over the world meet, share, learn, and experience cultural exchange to bring back ideas and inspiration for their own countries. The camp will welcome fantastic and dynamic guest speakers, provide information and the opportunity for you all to discuss issues facing Deaf youth from other countries. The Camp is also a place for us to celebrate what connects us beyond borders: our beautiful national sign languages, and our rich Deaf Culture.

Application Criteria:

- Between 18 – 30 years old
- Permanent resident or citizen of the United States
- Current NAD member
- Involved with NAD and deaf youth from within the local community to the national level

- Upon returning to the United States, delegates will commit to three-month community service for NAD. Community projects may include: b/vlogs and presentations on WFDYS Youth Camp experience at designated NAD and youth-related events.

Application Instructions:

Complete the application form and attach the following documents:

- Current resume
- Photocopy of passport (if you do not have one yet, a photocopy of your driver's license is acceptable – it is strongly recommended that you apply for a passport now)
- Three references (contact information only)

Please send the completed application, including required document attachments, via email to:

Allie Rice, Youth Programs Coordinator
National Association of the Deaf
wfdys@nad.org

Application Deadline: April 24, 2011

Application Form:

Name (first and last): _____

Street address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Gender: ___ Female ___ Male

Ethical Background (optional): _____

E-mail address: _____

Videophone: _____

SMS number (incl. country code): _____

T-shirt-size (pick one): S M L XL

How did you first find out about the WFD Youth Camp? Please check one:

School ___ Website ___ Other (please specify) _____

Medical and Special Requests:

___ Lactose-free ___ Gluten-free ___ Diabetic ___ Vegetarian ___ None

Other (please specify): _____

Any food allergies? Please list: _____

Medication or any other important things we should be aware of for the applicant's participation in the camp? Please be specific:

Occupation/Major: _____

Professional goals/plans:

List awards and/or honors that you have received:

List organizations of which you are a member:

Describe your involvement with NAD/Deaf Youth:

Share your international experience, if any: (i.e. have you travelled overseas before? participated in an international deaf event? know International Sign Language?)

As a potential camper, how can you contribute to the WFD Youth Camp program, as well as the deaf and hard of hearing youth in the United States?

What expectations do you have as a potential camper and what do you think you will benefit from the WFD Youth Camp program?

What does 'Deaf Youth Renaissance' mean to you?

Emergency Contact

Name (first and last): _____ Relationship: _____

Street address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

Cell phone: (_____) _____

Fax: (_____) _____ (Home or office)

E-mail Address: _____

Agreement

I am responsible for my travel, lodging, food, travel/medical insurance and all other associated expenses. WFD will provide complimentary registration to the XVI World Congress. I understand and accept the local laws in South Africa and the camp rules. I understand that the United States National Association of the Deaf (NAD) will screen and select the applicants who will attend and represent the United States at the WFD Youth Camp. I understand that I will represent the WFD Ordinary Member for the United States, the NAD, at the WFD Youth Camp.

Camp Applicant Signature

Print Name

Date