

Group Registration Form



Name of Congregation: _____

Congregation Address: _____

Street _____ City _____ ST _____ Zip _____

Congregation E-mail: _____

Congregation Phone: _____

(_____) _____ - _____

Name of Pastor: _____

Last _____ First _____ MI _____

Retreat/Lock-in

Name: _____
Date: _____

Each congregation must also designate one participating adult as their Congregational Group Leader. Registration confirmation and all communications will be sent to this individual

Name of Group Leader: _____

Last _____ First _____ MI _____ E-mail address _____

(_____) - (_____) - (_____) - _____

Daytime Phone _____ Home Phone _____ Cell Phone (during retreat) _____

Group Leader's Address: _____

Street _____ City _____ ST _____ Zip Code _____

List all registering participants. Include one Participant Registration Form for each individual. Indicate Male (M) or Female (F), and Youth (Y), College Student (C), Adult (A), or Pastor (P) and whether or not the registrant is a previous conference attendee (C) and/or a HT retreat/lock-in attendee (R). If neither, please leave both blank.

Name	Sex	Age Group	Previous				
1.	O M O F	O Y O C O A O P	O C O R				
2.	O M O F	O Y O C O A O P	O C O R				
3.	O M O F	O Y O C O A O P	O C O R				
4.	O M O F	O Y O C O A O P	O C O R				
5.	O M O F	O Y O C O A O P	O C O R				
6.	O M O F	O Y O C O A O P	O C O R				
7.	O M O F	O Y O C O A O P	O C O R				
8.	O M O F	O Y O C O A O P	O C O R				
9.	O M O F	O Y O C O A O P	O C O R				
10.	O M O F	O Y O C O A O P	O C O R				
11.	O M O F	O Y O C O A O P	O C O R				
12.	O M O F	O Y O C O A O P	O C O R				
13.	O M O F	O Y O C O A O P	O C O R				
14.	O M O F	O Y O C O A O P	O C O R				
15.	O M O F	O Y O C O A O P	O C O R				

Total Y : _____
Total C : _____
Total A : _____
Total
Registrants: _____
Total Deposit : \$ _____
 (If applicable)

- Mailing Instructions**
1. Make sure all forms are completed and legible.
 2. Make copies for your records

If you have more than 15 registrants, please attach a second page.