

# General Assembly Youth Ministry 2018

## Registration Form

**DEADLINE: February 1, 2018**

(One registration form per person)

Bank:  
Ck#  
\$:  
Staff signature

Staff Use Only

Personal Information				
Last Name	First Name		MI	Gender M/F
Street Address	City	State	Zip	Apt#
Telephone Home: Mobil:	Email Address		Age	Grade
Local Assembly	Church Membership/Affiliation		Pastor's Name	

Please fill in roommate information if someone will be staying in the room with you.

Roommate Information
RM#1 Name: District & Church: Telephone: Email:
RM#2 Name: District & Church: Telephone: Email:
RM#3 Name: District & Church: Telephone: Email:
RM#4 Name: District & Church: Telephone: Email:
RM#5 Name: District & Church: Telephone: Email:

Fee Includes: Registration, 3 Day Lodging, 3 Buffet Breakfast & Retreat Shirt					
Single	2 in Room	3 in Room	4 in Room	5 in Room	6 in Room
<b>\$559.00</b>	<b>\$322.00</b>	<b>\$243.00</b>	<b>\$204.00</b>	<b>\$180.00</b>	<b>\$164.00</b>

Please check the appropriate shirt size for applicant only			
Child <input type="checkbox"/> Small 4-6	<input type="checkbox"/> Medium 8-10	<input type="checkbox"/> Large 10-12	<input type="checkbox"/> XLarge 14-16
Adult <input type="checkbox"/> Small <input type="checkbox"/> Medium	<input type="checkbox"/> Large <input type="checkbox"/> X-Large	<input type="checkbox"/> 2-XLarge <input type="checkbox"/> 3-XLarge	<input type="checkbox"/> 4-XLarge <input type="checkbox"/> 5-XLarge <input type="checkbox"/> 6-XLarge

**Make all Checks and Money Orders payable to the General Assembly Church of Christ. DO NOT SEND CASH. Mail all fees and applications to General Assembly Youth Ministry P.O. Box 110778 Cambria Heights, New York 11411. Attention: Mrs. Teresa Pearson-Blount**

**REGISTRATION FEE NON REFUNDABLE/ TRANSPORTATION IS NOT INCLUDED**

I \_\_\_\_\_, give permission for my child, \_\_\_\_\_, to attend the General Assembly Youth Retreat to be held July 10-13, 2018 at the Great Wolf Lodge 1075 Weddington Road Concord, North Carolina 28027. The. In case of an emergency, I give permission to the General Assembly Youth Retreat Staff to secure medical services to provide the care necessary for my child's well being. I will not hold the General Assembly or the General Assembly Youth Retreat staff liable for any accident or injury, which may occur during the course of any General Assembly Youth Retreat activity. The General Assembly nor the General Assembly Youth Retreat staff assumes personal liability in case of accident or sickness

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
 Registration form for children under 18 years of age must be signed by parent/guardian.

**Parent/Guardian Signature\_\_\_\_\_ Date\_\_\_\_\_**  
**Registration form for children under 18 years of age must be signed by parent/guardian.**