

2012 ELCA YOUTH GATHERING NEW ORLEANS REGISTRATION FORM



2012 ELCA Youth Gathering
citizens with the saints
Ephesians 2:14-20

Youth Information

Full Name: _____ B-date: _____ Sex: M F
 Street: _____ City: _____ State: _____ Zip Code: _____
 Is this address new: Y N Youth E-Mail: _____
 Youth Cell Phone: _____ Home Phone: _____

Parent/Guardian Information (for those living in this household)

Adult #1: _____ Relationship: _____
 E-Mail: _____ Cell Phone: _____
 Work Phone: _____ Home Phone: _____
 Adult #2: _____ Relationship: _____
 E-Mail: _____ Cell Phone: _____
 Work Phone: _____ Home Phone: _____
 Med'l Insurance Co/HMO: _____ Policy No: _____
 Health Concerns: _____

In **Fall 2012** I am:

entering grade 10

entering grade 11

entering grade 12

A 2012 high school graduate

T-Shirt Size: S M L XL XXL
 (adult male size)

Will you also be doing AWOL 2012? Y N Maybe

High School: _____

***The Fine Print for parents:** My son/daughter has permission to participate in the 2012 ELCA National Youth Gathering with Lord of Life Children, Youth and Family Ministries. In the event that I cannot be reached in an emergency, I give permission to the physician selected by Todd Buegler, Elizabeth Pedersen, or the Lord of Life Youth Staff secure proper treatment for my child as named above. I also understand that if my child is intentionally creating problems, disrupting the group, or is found in possession of illegal or controlled substances, I may be contacted to provide immediate transportation home for my child at my expense. I also give permission for photos taken on summer trips of my child to be used for promotional purposes by Lord of Life.*

Parent/Guardian print name: _____

Parent/Guardian signature: _____ Date: _____

***The Fine Print for Youth:** I understand that I am applying to be a **full** participant in the summer trip listed above. I understand and will fulfill the "participation requirement" and that if I do not, I may be asked to give up my spot on the team. My behavior and participation on the trip will reflect on me, my church and my faith. I understand that if I cannot live by the church's expectations I may be asked to contact my parent/legal guardian to provide immediate transportation home at our expense*

Participant signature: _____

Date: _____

REGISTRATION IS DUE OCTOBER 5, 2011 WITH \$150 NON-REFUNDABLE DEPOSIT

Date rcvd:	Initials:	Payment type (circle one):	cash	Visa/MC	none	Check #: _____
Notes:		Amount: \$ _____				

**2012 ELCA YOUTH GATHERING
NEW ORLEANS
REGISTRATION FORM
for ADULTS**



2012 ELCA Youth Gathering
citizens with the saints
Ephesians 2:14-20

Full Name: _____

Street: _____ City: _____ State: _____ Zip Code: _____

Is this address new: Y N Email: _____ Cell phone: _____

Day phone: _____ Home phone: _____

Name of emergency contact: _____ Relationship: _____

Emergency day phone: _____ Emergency evening phone: _____

Emergency cell phone: _____

T-Shirt Size: S M L XL XXL (adult male size)

**2012 ELCA YOUTH GATHERING
NEW ORLEANS
REGISTRATION FORM
for ADULTS**



2012 ELCA Youth Gathering
citizens with the saints
Ephesians 2:14-20

Full Name: _____

Street: _____ City: _____ State: _____ Zip Code: _____

Is this address new: Y N Email: _____ Cell phone: _____

Day phone: _____ Home phone: _____

Name of emergency contact: _____ Relationship: _____

Emergency day phone: _____ Emergency evening phone: _____

Emergency cell phone: _____

T-Shirt Size: S M L XL XXL (adult male size)