

# YOUTH LEADER REGISTRATION FORM

Female     Male    Birth date: \_\_\_\_\_     Mr.     Mrs.     Ms.     Rev.

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

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

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

Email: \_\_\_\_\_

Phone: (\_\_\_\_\_) - \_\_\_\_\_

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

City: \_\_\_\_\_    State: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Special Needs: (please specify) \_\_\_\_\_

## REGISTRATION FEE (and bus fee if applicable) – due March 1, 2010

\$100 Deposit (\$125 balance due May 1, 2010)     \$225 full payment     \$50 bus payment

**YOUTH LEADER:** please send one group check payable to NWDCYD.

## CANCELLATIONS

A \$50 charge will be made for cancellations before May 1, 2010. No refunds will be given after that time.

**T-SHIRT:** I would like my rally T-shirt in size:  S     M     L     XL     XXL

**INTERESTED IN:**  Tubing

**ROOMMATE:** (One person) \_\_\_\_\_

## COMMITMENTS

I agree to participate in the 2010 NWDCYD Youth Rally, including transportation to and from the rally. I authorized the NWDCYD rally staff to consent to any emergency medical treatment necessary while attending or traveling to/from the rally. I declare that I am covered by primary accident and medical insurance and assume all legal and financial liability and responsibility for injury; I will not hold WELS, NWDCYD, or HEARTWOOD legally or financially responsible for any injuries or damage. Finally, I give NWDCYD permission to use any still or video images of me in future rally publicity.

**Youth Leader's Signature** \_\_\_\_\_    **Date** \_\_\_\_\_

I have read the youth leader information and certify that this person is qualified and supported by the congregation as an appropriate youth leader responsible for our youth.

**Pastor's Signature** \_\_\_\_\_    **Date** \_\_\_\_\_

Please return all registration forms and one group check (payable to NWDCYD) to:  
*Pastor Mark Luetzow, 804 Grignon Street, Kaukauna, WI 54130*

**FOR RALLY STAFF USE ONLY**

Date Received:

ID Number: