

**2013 Junior High Youth Gathering
Youth/Youth Leader/Senior High
Registration Form**



PLEASE PRINT IN INK OR TYPE:

(Please check one): **Female** **Male**

(Please check one): **Youth** **CLYFR Rep.** **Adult Leader** **Primary Adult Leader**

T-Shirt Size (Please check one): **S** **M** **L** **XL** **XXL** **XXXL** (All T-shirts are **adult** sizes.)

Last Name: _____ **First Name:** _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____ **Phone:** (____) ____-_____

E-Mail Address (not required): _____

Congregation: _____ **City/State:** _____

Special Physical Needs: Dietary restrictions, medications, allergies, diabetes, conditions, or other illness:
(Please list any pertinent information)

(For Youth Participants Only)

Age @ Gathering: _____ **Grade Level:** _____

Parent/Guardian Name: _____ **Home Phone:** (____) ____-_____

Work/Cell Phone: (____) ____-_____

Parent/Guardian Email: _____

(Will be used only for THIS gathering and is not given to any other group or organization)

Emergency Contact: _____ **Home/Cell Phone:** (____) ____-_____

(Must be someone **NOT** attending the gathering)

☐ *I agree to participate and cooperate in every way at the 2013 Southern District Junior High Youth Gathering. I am willing to take an active part in all events.*

Participant Signature: _____

☐ *I authorize the Southern District to have and use reasonable photographs, slides, moving pictures and audio/video tapes of the above named youth for purposes of legitimate Southern District records, public relations and/or advertising.*

Parent/Guardian Signature: _____

(Continued)

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(For Adult Leaders Only)

- ☐ I have read the adult leader guidelines and agree to abide by them (see Southern District web site for Guidelines). I will lead my group in full participation of all Gathering activities and am willing to assist Where I can.
- ☐ I authorize the Southern District to have and use reasonable photographs, slides, moving pictures and audio/video tapes of the above named youth for purposes of legitimate Southern District records, public relations and/or advertising.

Adult Leader Signature: _____

E-Mail Address (For Primary Adult Leader - needed for confirmation):

GATHERING DATE/SITE REQUESTED:

November 8-10 _____ **Blue Lake Camp & Retreat Center** (near Andalusia, AL)
November 22-24 _____ **Tall Timbers Baptist Conference Center** (near Alexandria, LA)

COST:

Registration: Due with form, non-refundable deposit	\$60.00 (\$50 for Senior High/CLYFR)
Balance due at gathering	\$35.00 (\$0 for Senior High/CLYFR)
TOTAL	\$95.00

Registration Fees: A non-refundable deposit of \$60/participant (\$50 total cost for Senior High / CLYFR Rep) is required with all applications. The balance is due at the Gathering. Please make your check payable to **Southern District-LCMS**.

Cancellations: Registration closes 15 days prior to the Gathering. No refunds are made as of the Monday prior to the Gathering weekend. **Substitutions:** Only substitutions are accepted after the close of registration for the Gathering. When substituting, please re-submit all appropriate forms.

Total Advance Registration Deposit:

\$ _____

Balance Due at the Gathering:

\$ _____

Include your non-refundable deposit or full payment with this form and all youth / adult leader registration forms.

No staples please! Send to: **Southern District – LCMS** (Jr. High Youth Gathering)

**100 Mission Drive
Slidell, LA 70460-5221**

Office Use Only

Date Processed: _____

Check #: _____

Amount: \$ _____