

## 2010 Rocky Mountain Synod Middle School Youth Gathering

### Group Registration Form

Church Information:

Church Name	
Address	
City	
State	
Phone	

Congregation's Primary Contact Information:

Name	
Email	
Landline Phone	
Cell Phone	

Complete the number registering and the total cost:

Total number of participants	
<b>EARLY BIRD ONLY (NOV 1-15)</b> x \$99 = total amount of check	<div style="font-size: 2em;">\$</div>
<b>REGULAR REGISTRATION (NOV 16-DEC 4)</b> x \$110 = total amount of check	

Room assignments will be made with a maximum number in each room. While youth and adults will share rooms together, the adult will not share a bed with a youth. In many cases, youth from different churches will be combined together, as all rooms must have the maximum occupancy.

### Registration Group 1 *(all same gender)*

ADULT in GREEN FIELD

type *M* or *F* in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

## Registration Group 2 *(all same gender)*

ADULT in GREEN FIELD

type **M** or **F** in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

## Registration Group 3 *(all same gender)*

ADULT in GREEN FIELD

type **M** or **F** in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

## Registration Group 4 *(all same gender)*

ADULT in GREEN FIELD

type **M** or **F** in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

## Registration Group 5 *(all same gender)*

ADULT in GREEN FIELD

type **M** or **F** in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

## Registration Group 6 *(all same gender)*

ADULT in GREEN FIELD

type **M** or **F** in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

## Registration Group 7 *(all same gender)*

ADULT in GREEN FIELD

type **M** or **F** in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

## Registration Group 8 *(all same gender)*

ADULT in GREEN FIELD

type **M** or **F** in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

## Registration Group 9 *(all same gender)*

ADULT in GREEN FIELD

type **M** or **F** in the field

type in 6, 7, 8 or 9

First Name	Last Name	Gender	Level

PRINT a copy of the form to send with your check to  
**Rocky Mountain Synod**

**455 Sherman, Suite 160  
Denver, CO, 80210**

SUBMIT the form electronically from this webpage

**complete online**