



IDYG 2011 Registration and Housing Form

Please provide us your congregation's housing information. Remember that 5 to a room should be an exception not a rule. A church may have only 1 five-person room for each gender.

Group Information

Please type or print clearly in ink

Congregation Name: _____ Congregation City: _____

Leader Name: _____ Leader E-mail: _____

Leaders Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Best time to call: _____

Would you like to receive IDYG updates by text? Yes No If yes, #: _____

Registration Payment Grid

				Totals
Early Bird Registration Due	\$55 (program fee)	X _____	(Total Participants)	\$ _____
September 5 – 26				
Standard Registration Due	\$65 (program fees)	X _____	(Total Participants)	\$ _____
September 27 – October 17				
Any changes made after	\$10 (per person	X _____	(Total # of Changes)	\$ _____
October 17, 2011	processing fee)			
Room Rate (4 person occupancy)	\$220	X _____	(Total Rooms)	\$ _____
Church Balance Due at Registration				\$ _____

Participant Registration

First Name	Last Name	Adult?	Gender	T-shirt Size	Medical Release Form?

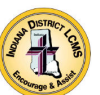
If your group requires more than one room, continue filling in registration information for your group on page 2.

NOTE: Medical Forms for each participant must accompany registration.

Send one check payable to "Indiana District Youth," enclose this form, and return to:
Heidi Mielke: 8115 Oaklandon Rd., Indianapolis, IN 46236 Phone: 317-823-5801 x222 hmielke@hclc.info



"The Mission of the Indiana District is to encourage and assist the Christian outreach and nurture of its congregations and other ministries"





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You may copy this form as needed.



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