

ALMA YOUTH MIX
GROUP REGISTRATION FORM

Main Contact: _____ Phone #: _____

Main Contact Email Address: _____

Church: _____ Presbytery: _____

Address: _____

City: _____ Zip: _____ Church Phone #: _____

Note: One adult per 8 or less youths, gender specific

Adults

- | | | | |
|--------------------|------------|--------------|---------------|
| 1. _____
Leader | Male _____ | Female _____ | Phone # _____ |
| 2. _____ | Male _____ | Female _____ | |
| 3. _____ | Male _____ | Female _____ | |
| 4. _____ | Male _____ | Female _____ | |
| 5. _____ | Male _____ | Female _____ | |
| 6. _____ | Male _____ | Female _____ | |

Youth

- | | | |
|-----------|------------|--------------|
| 1. _____ | Male _____ | Female _____ |
| 2. _____ | Male _____ | Female _____ |
| 3. _____ | Male _____ | Female _____ |
| 4. _____ | Male _____ | Female _____ |
| 5. _____ | Male _____ | Female _____ |
| 6. _____ | Male _____ | Female _____ |
| 7. _____ | Male _____ | Female _____ |
| 8. _____ | Male _____ | Female _____ |
| 9. _____ | Male _____ | Female _____ |
| 10. _____ | Male _____ | Female _____ |
| 11. _____ | Male _____ | Female _____ |
| 12. _____ | Male _____ | Female _____ |
| 13. _____ | Male _____ | Female _____ |

Amount Enclosed: \$ _____

Mail with individual registrations to: John Zipp
(email – jazipp@cablespeed.com) 893 Miami Dr.
Mason, MI 48854