



**Staubenville Youth Conference 2018
Main Campus 3 Conference**

**Registration Form
June 28-30, 2019**

Participant's Name: _____ Birthday: _____

Full Address: _____

Shirt Size: _____ Home Phone: _____ Cell Phone: _____

Email: _____ Grade: _____

PARENT / EMERGENCY CONTACT:

Name: _____

Home Phone: _____ Cell Phone: _____

HEALTH INFORMATION:

Medication: _____

Allergies: _____

Dietary Restrictions: _____

PARENTS SIGNATURE: _____ **Date:** _____

**TO SECURE YOUR SPOT, PLEASE RETURN THIS FORM TO NICK ALONG WITH A \$50
DEPOSIT OTHERWISE YOU WILL BE PLACED ON A WAITING LIST.**