



A CONFERENCE FOR JR. HIGH AND CONFIRMATION STUDENTS

Depart at **2:30 PM** on Fri. **Jan 26th** and return around **10:00PM** on Sat **Jan 27th, 2018**.

Yes! Register me for **Believe by Dec. 17th** (Choose one of the 2 options below)

- Enclosed is the **full \$89 Registration Fee**
(An additional \$5 will be collected upon arrival at Aldersgate for lunch on Saturday. Additional money will be needed for a fast food dinner Saturday night.)
- I need help with the fee and have enclosed this amount. \$_____. (By Dec. 17th)

We have Fusion T-Shirts!!! (These are the same T-shirts we had last year)

T-Shirt Size: (Cost \$10. These are not required!)

Adult ___ S ___ M ___ L ___ XL ___ 2XL **Youth** ___ M ___ L

Name: _____ D.O.B. _____ Address: _____

City: _____ Youth Phone: _____ Parents Email: _____

(More information, a CIY Medical Form, and a packing list will be emailed out after the forms are due)

Circle grade: Confirmation Student 7th Grade 8th Grade

I give permission for _____ to attend the
Name of youth/minor

BELIEVE Conference in **Tulsa, OK**. I understand an electronic form found online at aldersgatechurch.com/youth is required for overnight events in addition to this permission slip. (The medical consent form allows a minor to be treated at a medical hospital in the event of an emergency if the parents are unavailable.)

I **am/am not** interested in attending as an adult **chaperone**.
Circle one

Parent/guardian Name (please print) _____ Parent/guardian signature _____ Date _____

Please list parent contact information, including cell phone numbers. If only one parent contact, please list one other person we can contact in the event of an emergency during this event.

Name: _____	Name: _____
Relationship: _____	Relationship: _____
Phone: _____ (H) _____ (C)	Phone: _____ (H) _____ (C)

We plan to stay at Asbury United Methodist Church
6767 South Mingo Road, Tulsa, Oklahoma 74133 | 918.492.1771
Check out this site for more info: www.ciy.com/believe