## Districts 2019 - January 4-6

All Registrations Due Nov. 18

Cost: \$110 (please make checks payable to Terrace Shores Youth) This fee covers the Conference, hotel, transportation, and 2 breakfasts

Scholarships are available upon request. Questions? Call Ryan 920-229-4980

How do I register? Fill out the medical form and return with payment.

Medical Release Form				
Parental Authorization:				
I hereby give my permission for	~ 1 1			to attend Terrace
Shores Evangelical Free (			1 •	T
Church's youth functions. In the event that I cannot be reached in an emergency, I				
hereby give permission to the physician selected by a sponsoring adult to hospitalize, or secure proper treatment for my child's as named above.				
secure proper treatment for my child s	s as named abov	ve.		
Signature of Parent or Guardia	n			Date
Student information:				
Name			Sex	Age
GradeBirthday	_			
Parent Name				
Home Phone (			_)	
Address				
City			Zip Co	ode
Other Contact	Phone	()_		
	Allergies:			
Allergies:				
Medications Currently Taking:				
Family Physician	P	hone (_	)	
Health Insurance Co.				
Policy No				