

4th-6th Grade Retreat
Group Registration Form
May 1-2, 2010

Name of Church _____

Address _____

City _____ State _____ Zip _____

Contact Person _____

Phone #'s Office or home or cell

Contact Email _____

Make sure you have at least one adult advisor per six youth of the same gender.

<i>Attendees Name</i>	<i>Gender</i>	<i>Youth (grade) or Adult</i>
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