## **VENTURA YOUTH FORUM**

(please print and include \$20.00 per person)	
CHAPERONE NAME	CELL#
YOUTH NAME	AGE:GRADE:
ADDRESS	GENDER: M F (circle one)
T-shirt size RE BE GUARANTEED TO RECEIVE A T-SHIRT	EGISTRATIONS POSTMARKED AFTER OCTOBER 7 <sup>TH</sup> CAN NOT
CITY,STATE,ZIP	
EMAIL:	CHURCH E-MAIL:
CONGREGATION COMING WITH:	
IN CASE OF EMERGENCY, CONTACT	PHONE #:
INSURANCE CARRIER:	POLICY #
ALLERGIES/SPECIAL NEEDS:	
I agree to follow all rules of the Ventura Youth Forum November 1-3, 2019	n and attend and participate in all events and activities that are scheduled for
PARTICIPANT SIGNATURE:	DATE:
	to receive emergency medical treatment if needed while 03/2019. Nor will I hold the Ventura Church of Christ responsible for any medical nsent to my child's signature above, agreeing to follow all rules and attend all
PARENT/GUARDIAN SIGNATURE:	DATE:
PARENT/GUARDIAN (print)	PHONE
Please make all	ation or the Youth Forum? Call Ben Ewald: (805)665-7506 or email: benlewald@gmail.com checks payable to the Church of Christ and mail to: 5403 N. Bryn Mawr St.

403 N. Bryn Mawr St. Ventura, CA 93003