

**PA CHRISTIAN ENDEAVOR
SUMMER ASSEMBLY**
July 15 to 20, 2007
ADULT REGISTRATION
(18 YEARS AND OLDER)

ATTENDING AS:(circle all that apply)

Youth Group Leader * Teacher
M&M * College/Career * Staff
Other _____

Please print information clearly in black or blue ink

PARTICIPANT'S NAME _____ Phone (____) _____

Gender: **M** or **F** Birth date _____ Work Phone (____) _____

Street Address _____ Cell Phone (____) _____

City _____ State _____ Zip _____ E-mail _____

CHURCH

Street Address _____ Pastor _____

City _____ State _____ Zip _____ Phone (____) _____

Write room-mate preferences here. We'll do our best to put you together.

1st choice _____ 2nd choice _____ (Single room please _____)

GENERAL HEALTH INFORMATION:

List any medications needed; physical limitations; allergies to food, drugs or bee stings, etc; current illnesses; concerns like asthma, heart problems, diabetes, seizures, etc; and any other helpful information. PACE is not responsible for the purchase of medicine or special foods. *Youth leaders are responsible for dispensing any medications to their teens.*

_____ Date of last tetanus shot _____

HEALTH INSURANCE INFORMATION:

Physician: _____ Phone (____) _____

Dentist: _____ Phone (____) _____

Your insurance card information is necessary to attend. Please make certain a photocopy of the front and back of your insurance card is attached to the registration form.

EMERGENCY CONTACT PERSON - In an emergency contact:

Name _____ Relationship _____

Address _____

Daytime phone (____) _____ Evening phone (____) _____

Cell Phone (____) _____

ADULT PARTICIPANT AGREEMENT:

I agree to participate in the entire Pennsylvania Christian Endeavor Summer Assembly with enthusiasm. I will conduct myself in a Christian manner and follow the Teen Guidelines.

Signature of participant: _____ Date _____

Print name _____

****Submit your Adult Medical Form, and a copy of your Insurance Card with this Adult Registration Form to your group leader. If you are not attending with a group, please mail to PACE, P.O. Box 190, Gilbertsville, PA 19525****

Please enclose your **EARLY BIRD** registration fee of **\$310 by 5/15/07** (\$350 after 5/15/07)

**** Get a \$25 discount if you bring a friend who has never attended Summer Assembly ****

Name of the friend(s) you invited: _____

