

18Th Annual LSC Middle School Lock-In
October 13-14, 2017
University of Northern Iowa, Lutheran Student Center

Registration Form:

Registration Fee: \$40 per Youth registered by September 29th, After September 29th the fee is \$50. Registrations will NOT be accepted after October 11th. (adults free)

Please Make Checks out to your church for the registration fee

Participant Information:

Name: _____ Date of Birth: _____
Grade in school: _____ Gender: _____
Home Address _____ City: _____ Zipcode _____
Home Phone Number _____
Name of Parent or Guardian: _____
T-shirt size (Student only): _____ Congregation: _____
Dietary restrictions? If so, what? _____
Chaperone Name: _____
_____ Please Check here if you are coming as an adult Chaperone

Permission for Treatments:

(The information requested below is required by emergency room staff to be used in care of medical emergencies only. If you cannot provide this information, emergency medical attention may be delayed or even denied by hospital staff.)

Name of Dr. _____ Dr.'s Phone # _____
Medical Insurance Co. _____
Insurance Policy number: _____

Emergency Contact:

Name: _____ Relationship to Participant: _____
Phone Number: _____
Please List allergies, special medical concerns or needs of participant:

Please List all medication participant is currently using:

Parent/Guardian consent:

My son/daughter has permission to participate in all lock-in activities. In case of my absence or unavailability in the time of a medical emergency, you are hereby authorized to preform or arrange for whatever treatment you may consider necessary for my minor child. I give the Northeastern Iowa Synod or the Lutheran Student Center of the Evangelical Lutheran Church in America permission to use photos of my minor child for church publications.

Parent/ Guardian Signature: _____