

REGISTRATION

Church Name: _____ City: _____

Church Phone: _____ Church Email: _____

Contact Person: _____ Email: _____

Home Phone: _____ Cell Phone: _____

Registration Category	# of Paying Registrants (including leaders)	Total Due	Remaining Balance Owed Subtract non-refundable \$20 deposit per paying registrant (due with registration)
Postmarked by October 12	x \$60		
Postmarked by October 26	x \$70		
Postmarked after October 26	x \$80		

Number of free registrations: _____

Once you have 10% more paid registrants than your highest attendance according to the past 3 years, all remaining registrants from your church will be free. Example: If you brought 20 people in 2017 and that attendance was higher than 2015 or 2016, then the max amount of registrations you will need to pay for is 22. The rest of your group will be free. If you have questions or need to know how many paying registrations you need before reaching your free rate, please email Kirsten at kbowser@imnag.org.

Make checks payable to:
Iowa Ministry Network

Mail to:
Fall Youth Conference
Iowa Ministry Network
10525 Buena Vista Ct.
Urbandale, IA 50322

Please send one check for the entire deposit or total fee. Personal checks (unless for the entire deposit on one check) or cash will not be accepted.

Keep a photocopy of this form for your records.

If you do not receive an email confirmation of your registration within 10 business days, please follow up with Kirsten at kbowser@imnag.org to make sure your registration has been received.