



Contact Name: \_\_\_\_\_

Ministry/School/Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Item(s) you will be exhibiting: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please email this form & \$200 payment to [dydsec@adcag.org](mailto:dydsec@adcag.org)  
no later than October 14, 2019 and mail check to:

**Alabama Youth Ministries**  
**5919 Carmichael Road**  
**Montgomery, AL 36117**