



Individual Registration Form
January 17-19, 2019

Name _____ Teen Adult (circle one)

Gender _____ Date of Birth _____ Current Grade _____

T-shirt size (adult): S M L XL XXL (circle one)

Parent/Guardian Name _____

Phone _____

Church you regularly attend _____

Church you are attending Elevate Conference with _____

Do you give consent to Elevate to use your child's image in media (video/photography) throughout the course of the conference? YES NO (circle one)

If the parent/guardian cannot be reached, who should we contact in case of emergency?

Name _____

Phone _____ Relationship _____

REGISTRATION FEE SCHEDULE

Students:

Early registration fee = \$40 per student through January 10th, 2019

Walk up registration fee = \$50 per student on Day of (space permitting)

Adults:

Registration fee for Adult Leaders is \$10 IF wanting a t-shirt (**no charge otherwise**)

Youth Pastor's FREE when registering your group with Elevate Conference.

-PLEASE TURN OVER AND SIGN-

Liability Release

As a parent/guardian of the applicant, I hereby give my approval and consent to this application, and therefore release any sponsoring congregation and/or any Elevate Conference staff member from any and all liability for sickness, accidents, or injuries of any nature caused whatsoever, while attending and traveling to or from Elevate Conference. The undersigned does also give permission for my child to ride in any vehicle designated by the adult in whose care my child has been entrusted while attending and participating in Elevate Conference. I further give authorization for the conference director or any approved Elevate Conference personnel to transport my child to a local doctor's office or hospital emergency room and to secure the services of a licensed physician in case of an emergency. I further promise to utilize family insurance for any major medical care requiring hospitalization and agree that I shall be liable and pay for all costs and expenses incurred in connection with such medical services rendered to my child pursuant to this authorization.

Parent/Guardian signature _____ Date _____