

TNT@TNU ADULT CHAPERONE/SPECTATOR REGISTRATION FORM

LOOK FOR EVENT RULES AND INFORMATION AT mvnazarene.org Dates: April 4-7, 2024

\$125 Postmarked by: **FEBRUARY 6**; Mail Form to: **Mike McAdory, PO Box 645, Clearwater, SC 29822**

(Please **PRINT** all information)

District: **South Carolina**

Name: _____

Address: _____
(Street)

_____ (City) _____ (State) _____ (Zip Code)

Home Church: _____ Cell phone: (____) _____

E-Mail Address: _____ Gender: Male ___ Female ___

(Please check all that apply)

Adult Chaperone: _____ Adult Spectator: _____ (Chaperones are willing to stay in a room with students)

I will be driving: _____ I will be riding with _____ church

I wish to be fully registered: _____ (Hotel, Meal Plan & T-Shirt included) T-Shirt Size: _____

I do NOT wish to be fully registered: _____

I do NOT wish to be fully registered, but would like a T-Shirt: _____ (\$15 per shirt) T-Shirt Size: _____

I do NOT wish to be fully registered, but am willing to help _____ (room check-in, rides to off campus events)

I will be staying separately at a different hotel: _____

FULLY REGISTERED PRICES

3 Nights (Thursday, Friday, and Saturday)

4 per room/\$290 each

3 per room/\$350 each

2 per room/\$430 each

1 per room/\$635

I will be sharing a room with _____ people. Name(s): _____

NOT REGISTERED HOTEL PRICES

3 Nights (Thursday, Friday, and Saturday)

\$525/per room

2 Nights (Which two nights? _____ & _____)

\$350/per room

Place: Trevecca Nazarene University
333 Murfreesboro Rd.
Nashville, TN 37210
www.trevecca.edu