

BMA of Oklahoma Outbreak Registration

Name of Church: _____

Address: _____

Adult Sponsor: _____

Age	Male	Female
Pre 6 th Graders	_____	_____
6 th Graders	_____	_____
7 th Graders	_____	_____
8 th Graders	_____	_____
9 th Graders	_____	_____
10 th Graders	_____	_____
11 th Graders	_____	_____
12 th Graders	_____	_____
Young Adults	_____	_____
Adults	_____	_____
Sub-Totals	_____	_____
Total	_____	_____

**Registration fees
are \$45 per
participant**

Registrar Section

Total Participants _____

x \$45

Amount Due _____

Method of payment _____

**Please make checks
payable to BMA of
Oklahoma Youth**

Shirt Exchange

Shirts needing to be exchanged: _____

Additional shirts requested: _____