

Combined Youth Conference 2013

27 to 29 June 2013 (Thursday to Saturday)

Registration Form (Closing date: 2nd June 2013)

Full Name: _____

Gender*: M / F Date of Birth (dd/mm/yy): ___/___/___ Age: ___

Telephone (Home): _____ (Mobile): _____

Email: _____ Church: _____

Specific health concerns / Allergies (if any): _____

Special request (if any): _____

Conference Participation Status*: Full-time / Part-time

**please delete accordingly*

In Case Of Emergency, contact:

Name: _____ Tel number: _____

For those below 18 years old:

Parent's Name and Signature: _____

For Part-Timers, please indicate below the meals you require*.

Also, pl indicate (in the provided) which nights you are staying.

Date	Thursday (27 Jun)	Friday (28 Jun)	Saturday (29 Jun)
Meal	<input type="checkbox"/>	<input type="checkbox"/>	
Breakfast (\$2)			
Lunch (\$3)			
Dinner (\$3)			
Supper (\$1)			
Amt to be paid			

**Part-timers will pay only for the meals they require.*

Conference Fees (full-time): \$20

Please submit this completed form and the conference fees to Bo Hao or email to combinedyouthconference@gmail.com and submit the fees on the first day of the conference.

The conference schedule and further details are available at www.truthbpc.com/cyc.

Please contact Bo Hao @ 96288839 for further details/clarifications.