

BREAKOUT '18 Group Registration Form

Church: _____

Address: _____

City, State, Zip: _____

Phone #: _____

Youth Leader / Front Person: _____

YL E-Mail: _____

of Students Attending: _____

@ \$25 per Total \$: _____

of Adult Leaders Attending: _____

***Note: We do not charge for adult leaders. If leaders would like a shirt, we do ask that they pay \$5. Churches are welcome to make a donation for their leaders if they wish.**

Total # Attending: _____

Total \$ Included: _____

of T-Shirts (of each size):

S _____ M _____ L _____ XL _____ XXL _____

Other (List sizes and # of each): _____

Mail completed form and payment to: **BREAKOUT Registration**
Attn: Craig Fullerton
2330 E. Market St.
Akron, Ohio 44312

(Checks should be made out to: Arlington Memorial Baptist Church or simply AMBC.)

***Each student must also have a permission slip/medical release signed by parent or guardian.**

****Forms due by February 24 to guarantee a T-Shirt.**