



This registration form is for **ALL** attendees of the 2014 Two Week Meeting, whether out of state or local. Thank you for taking the time to register and Lord willing we anxiously await your arrival. (If able, please register online at <http://pleasanthillchurchofchrist.org> if unable, please return this form to: Ginger Hermon, 2018 -153rd Ave, Carlisle, IA 50047)

1. **Contact Name ***

2. **Contact E-mail Address ***

3. **Contact Home Mailing Address ***

4. **Contact Phone Number(s) ***

5. **Contact Home Congregation**

6. **Full name of each attendee (Please provide age if 16 or below) ***

7. **Do any of the above listed names require housing arrangements? ***

Circle only one please.

Yes

No

8. **Please list below all attendees who need housing. If arrangements have already been made please tell us where everyone is staying.**

9. If not you, list designated guardian(s) for those listed under 16 years of age?

10. Will you need transportation? *

Circle only one please.

Yes

No

11. Describe below your transportation needs.

12. Dates each person will be attending? *

13. Special needs/medical conditions/food or pet allergies or anything else that we should know?

14. List names and ages of those (3-12 yrs) who will be attending children's classes during designated hours.

15. Are you interested in teaching children class(es)? If so, please indicate desired ages and provide contact information below.

16. If you reside in the local area, would you be willing to provide housing?

Circle only one please.

Yes

No

17. If you answered yes, can you also provide transportation?

Circle only one please.

Yes

No

18. Please provide information as to how many guests you can keep, what ages you prefer and on which dates you can provide housing. Please indicate types of household pets if any.
