

Registration Form
PRAYER & ACTION

Mission Experience in Our Own Backyard
Summer 2017

Fee: \$65.00 per person

Group Leader: _____

Parish: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (home): _____ (work): _____

E-mail: _____

We are interested in the marked Dates & Locations: *(please indicate first and second choices)*

_____ June 11-16, 2017 Russell

_____ June 18-23, 2017 Russell

_____ June 28 - July 1, 2017 Russell

_____ July 9-14, 2017 Beloit

_____ July 16-21, 2017 Beloit

_____ July 23-28, 2017 Beloit

Return forms and payment to:

Prayer and Action
PO Box 825
Salina KS 67401

Number of High School Students participating (9th-12th during school year 2016-17) _____

Number of Adult Sponsors participating (1 per 6 youth required) _____

NOTE: Adult Sponsors must be 25 years old or older.

Non-refundable registration fee: \$65 per person due with this form.

Permission forms can be found on website: salinadiocese.org/youth-ministry , Docs

Adult: Forms A, E, K Youth: Forms B, C, D, HIPAA, Photo Waiver

