



Registration Form

PRAYER & ACTION

Mission Experience in Our Own Backyard

Summer 2018

Fee: \$70.00 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 10-15, 2018 | Plainville |
| _____ | June 17-22, 2018 | Plainville |
| _____ | June 25-29, 2018 | Plainville |
| _____ | July 8-13, 2018 | Concordia |
| _____ | July 15-20, 2018 | Concordia |
| _____ | July 22-27, 2018 | Concordia |

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 2017-18) _____

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

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

Non-refundable registration fee: \$70 per person due with this form.

Permission forms can be found on website: [salinadiocese.org /youth-ministry](http://salinadiocese.org/youth-ministry) , Docs

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

