

# Beautiful U Girls Conference

Saturday, April 6, 2019

## Group Registration

*Please use this form when registering a group.*

*Everyone (students and adults) also must fill out an "Liability & Medical Release Form".*

|                                     |
|-------------------------------------|
| Church / Organization Name: _____   |
| Mailing Address: _____              |
| City: _____ State: _____ Zip: _____ |

### ADULT IN CHARGE OF YOUR GROUP AT BEAUTIFUL U:

|                                     |
|-------------------------------------|
| Name: _____                         |
| Title: _____                        |
| Cell Phone: (     )     -     _____ |
| Email: _____                        |

### PRICING:

#### **2019 Girls Conference Registration Rates** *(Registered before the event)*

**Individual Rate—\$ 45**

**Group Rate Rate (5 or more)—\$ 35 per person**

**Rates at the door:** Individual Rate—\$ 60     Group Rate (5 or more)—\$ 50 per person

### REGISTRATION NUMBERS:

|                       |                     |                           |
|-----------------------|---------------------|---------------------------|
| Total Students: _____ | Total Adults: _____ | Total # Registered: _____ |
|-----------------------|---------------------|---------------------------|

### AMOUNT ENCLOSED:

|   |
|---|
| \$ _____  |
| Please send <b>ONE</b> check. Make check payable to <b>Harvest Ministry</b> .       |
| <i>Mail registration to: Harvest Ministry, 407 Edwardsville Rd., Troy, IL 62294</i> |

|                                       |               |
|---------------------------------------|---------------|
| Office Use Only:     Check No.: _____ | Amount: _____ |
| Notes: _____                          |               |