

MYC FORMS

DUE: ASAP

REGISTRATION FORM #1

Congregation Name _____ City, State _____

Contact Name _____ Telephone Number _____

Email Address _____

ROOM RATES: 2 people, \$225 per person | 1 person, \$450

Number of Registrants \$225 per person (2 people per room)	Number of Registrants \$450 per person (1 person per room)

Mail Worksheet #1 to:

Midwest Youth Conference
attn: Sheldon Heights Church of Christ
11325 South Halsted Street
Chicago, IL 60628

Number of Males Number of Females

Total Number of Registrants Total Number of Rooms

TOTAL AMOUNT ENCLOSED

Mail Worksheet #2 to:

MYC - attn: Sheldon Heights Church of Christ
11325 South Halsted Street
Chicago, IL 60628

REGISTRATION FORM #2

DUE: MAY 31, 2024

Congregation Name _____ City, State _____

Contact Name _____ Telephone Number _____

Email Address _____

ROOM RATES: 2 people, \$225 per person | 1 person, \$450

Number of Registrants \$225 per person (2 people per room)	Number of Registrants @ \$450 per person (1 person per room)

T-SHIRT ORDER



S	<input type="text"/>
M	<input type="text"/>
L	<input type="text"/>
XL	<input type="text"/>
2XL	<input type="text"/>
3XL	<input type="text"/>
4XL	<input type="text"/>

Number of Males Number of Females

Total Number of Registrants Total Number of Rooms

TOTAL AMOUNT ENCLOSED