

Church Registration **2019**

Welcome youth or church leaders! Please use this form to register your group for Project Shine 2019. If you have any questions regarding the registration process or this form, please contact Kristi Miller at kristidawnmiller@gmail.com or 330.388.1482.

Registration procedures and deadlines:

- Cost per youth is \$200. If spots are reserved with a \$25 non-refundable deposit on or before
 April 3, 2019, all youth will receive a \$25 discount off the \$200 fee for a total amount due per student of \$175.
- Spots NOT reserved by April 3, 2019, are subject to the \$200 registration fee.
- Please note: 100% of the remaining registration fees for your church and registrations for all
 participants must be turned in on or before <u>June 1, 2019</u>, or all spots being held will be relinquished
 and the deposit money forfeited.
- Adults are required to pay a \$25 non-refundable registration fee to be turned in with their registration form. Additional love offerings are encouraged and accepted!
- Please note, each church must have one adult around the clock for every 1-5 youth they bring and a leader of each gender for the overnight locations.
- Please ensure your group can provide transportation to and from Project Shine and one or two vansized vehicles for use (with your driver) during the week.

Mail completed forms to:

Project Shine P.O. Box 3895 Akron, OH 44314

Email completed forms to:

or kristidawnmiller@gmail.com

*Include deposit check made payable to Project Shine or make an online payment at projectshineakron.org prior to sending.

Name of Church/Organization: Name of Youth Leader or Church Rep:	
Your Contact information: Phone:	
Number of adults attending: x \$25 (each) =	
Number of youth attending: x \$25 (each) =	
Number of 6+ passenger vehicles available for use:	
Do you have any students who shouldn't work together?	
Please fill out the reverse side of this form v	vith as much info as possible.

Office use: date received _____ amount included _____

Youth Participants- (Please make copies if you have more participants.)

Name:		M/	F:	Current Grade/Age		T-shirt Size:	
Do you have student	a interes	tod ov "a	الدمالا	in the fe	llowing orong (li	st names).	
Do you have students					mowing areas (ii	st names):	
Climbing tall ladders:							
Sharing Testimony:				Dr F	amas:		
Children's Ministry: _				EV	angelism:		
Adult Participar	its (be	st gues	ss)- (Pl	ease ma	ke copies if you l	nave more pa	rticipants.)
Name: M/F: Ag		Age:	Youth		Time Commitment: (all week, day crew,		T-
							shirt
					evening, overni		
			Ministry:				Size:
Do you have seen ad-	lta intere		 /	// in the	following areas	(liat ma	
Do you have any adu					ioliowing areas	(iist names):	
Climbing tall ladders:							
Carpentry: Landscaping:							
Roofing:				Sic	ding:		
Painting:				Dr	ywall:		
Evangelism:				Ph	oto/Video:		
Do any of your adults	s have a	criminal	history	? If yes p	olease explain be	elow.	
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^{*}Project Shine reserves the right to refuse any person for supervisory positions including, but not limited to overnight supervision.