

CONCLAVE 2010
MAIL-IN REGISTRATION FORM

GROUP INFORMATION

Contact Person: _____ Youth Minister/Leader Pastor Other
 Email: _____ Cell Phone: _____
 Church: _____ Church Phone: _____
 Church Address: _____
 City: _____ State: _____ Zip: _____

GROUP REGISTRATION

Indicate your desired ticket purchases by completing the blanks within the ticket structure below. When purchasing under the "Additional Tickets" category, the group price/ticket decreases based on the number of tickets purchased.

| TICKET TYPE | PRICE | x | QUANTITY | = | COST |
|---|---|---|------------------------------|---|-------|
| FIRST TICKET <i>Youth Minister/Youth Leader</i> | \$149 | | <input type="checkbox"/> Yes | | _____ |
| SPOUSE TICKET <i>Youth Minister/Leader's Spouse, max 1</i> | \$59 | | <input type="checkbox"/> Yes | | _____ |
| ADDITIONAL TICKETS <i>Ministry Staff/Volunteers/Etc</i> | \$119 (1-5) \$109 (6-10) \$99 (11+) | | | | _____ |
| STUDENT TICKETS <i>High School Students, grades 9-12</i> | \$89 | | | | _____ |
| COLLEGE/SEMINARY TICKETS..... <i>Full-time College/Seminary Students</i> | \$89 | | | | _____ |
| | | | TOTAL: | | _____ |

GROUP NAMES

Please list the names of all attendees (including yourself) using the spaces below. Attach another sheet if necessary.

METHOD OF PAYMENT

- Enclosed Check (Payable to Conclave)
- Visa
- MasterCard

Card Number: _____
 Name on Card: _____ Exp: _____
 Billing Address: _____
 City/State/Zip: _____

Please return to: *Conclave 2010 | Youth Ministries | 6405 Sugarloaf Pkwy | Duluth, GA 30097*
 For additional information and/or questions, please call 1-800-746-4422 x 234.