



AACF Leadership Training Conference 2009

June 14-19, 2009

Final Registration by **June 1, 2009**

Very Important: Only **ONE** Person Per Form. Please **Print Legibly or Type** Your Info Directly Onto This Form. Incomplete Forms May Result In Late Fees

Name: _____ Female Male Birthdate: __/__/__

Address: (after 6/14/09) _____

City: _____ State: ____ Zip: _____ Phone: Cell (____) _____

Church: _____ Campus: _____ E-mail: _____

Emergency Contact Person: _____ Parent Other _____

Phone #: _____

Payment Enclosed For:

LTC Fee \$365.00 _____

Camp Photo \$ 9.00 _____

Late Fee (If Postmarked After 5/15/2009) \$ 25.00 _____

I'm Giving a Scholarship Donation Of _____

Total Enclosed: \$ _____

Workshop Series: Choice 1: _____ Choice 2: _____

Workshop Elective Sign-ups will be at the registration table at The Oaks upon arrival.

MANDATORY

By his/her signature, my Campus Minister affirms my desire to attend LTC 2009.

Staff Signature: _____

Date: _____

PLEASE READ CAREFULLY AND COMPLETE THE NEXT PAGE

OFFICE USE ONLY:

Cancellation Info:

Amount Enclosed: _____ Check #: _____ Postmarked: _____ Date: _____
Date Received: _____ Refund Amount: _____ Check #: _____

PLEASE READ AND SIGN:

Registration is ONLY valid with required signatures and fees. Valid registration must be accompanied with demonstration of FULL PAYMENT, signed as required. Make checks payable to **JEMS/AACF** (attn: LTC). Send to:

JEMS/AACF LTC Conference Registration
948 E. Second St., Los Angeles, CA 90012
(213) 613-0022

Postmarked by May 15, 2009 (if postmarked after May 15, 2009 – add \$25.00 Late Fee)

Demonstration of FULL PAYMENT is a check for \$365 before May 15, or \$390 after, and an additional \$9.00 if a photo is desired. If the check is not for the full amount, a completed scholarship/loan form must be attached with explanation to where and when the difference of payment will be received.

REFUNDS/CANCELLATIONS: All cancellations are subject to a non-refundable processing fee of \$15/person up to June 1, 2009 at 5PM, after which the fee increases to \$35/person. Those who do not cancel by June 9, 2009 and/or “No-shows”, will receive NO REFUND. All refunds require a written request (fax, e-mail, or handwritten) sent to the JEMS/AACF office, ATTN: LTC.

TRANSPORTATION costs are not included in the conference fees. You must make your own arrangements. If you are having problems with transportation, please contact your campus staff. We recommend carpooling as parking is limited.

PARTICIPATION AGREEMENT & LIABILITY WAIVER:

I agree to participate in the programs, abide by camp regulations, and attend all stated meetings and services. I understand that this is a Christian conference and that the staff at any time reserves the right to release me from the conference if I choose not to comply. Expenses for this will be charged to me, my parents, or my guardian.

I voluntarily assume all risk and responsibility for my physical condition and for any injuries or damages to my person or property that I might sustain. I voluntarily release, indemnify, defend, and discharge JEMS, AACF, its directors, officers, employees, or agents for any injury or damage to my person or property regarding from my participation in the conference, including without limitation travel to and from camp, whether due to negligence, carelessness, or any other fault or cause. It is further understood that this waiver, release and assumption of risk is binding on my heirs, personal representative(s), legal representative(s), successors, and assigns. With my signature below, I acknowledge that I have read this waiver, release, indemnify, defend and assumption of risk and fully understand its terms, conditions, and meanings.

Signature: _____ Date: _____

If under 18, guardian signature is required below:

Signature: _____ Date: _____

Medical Considerations / Disabilities: Please outline below any restrictions, allergies, conditions, medication currently taken, and/or special considerations for accommodations due to physical limitations.