



2009 REGISTRATION FORM

Contact Person _____

Church Name _____

Address (for mailings to be sent) _____

City _____ State _____ Zip _____

Phone (_____) _____ E-mail Address _____

Check desired Workcamp:	Chippewa Falls, Wisconsin	June 14-20, 2009	_____
	Muncie, Indiana	June 28-July 4, 2009	_____
	Oskaloosa/Eddyville, Iowa	July 12-18, 2009	_____
	Pickford, Michigan	July 26-Aug. 1, 2009	_____

I would like to reserve _____ spaces. (Remember you need 1 adult for every 5 teens.)

Enclosed is \$ _____ (\$75.00 deposit per participant)

(Please make checks payable to: **TeenServe**)

Name <i>(All names known at this time)</i>	Age	Gender	T-Shirt Size
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
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16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			

If you have more than 24 participants, please fill out another form. Thanks!

Mail deposits and Registration Form to: **TeenServe, 27261 259th Street, Holcombe, Wisconsin 54745**
 or mail deposits and fax form to: (612) 677-3853