

NAZ BLAST

Summary Sheet

Church: _____

Contact: _____

Email: _____

Phone: _____



Registration – \$15.00 (includes event registration, t-shirt, Friday night lodging (if needed), breakfast (for those who stay Friday night) and lunch on Saturday).

Total number of participants: _____ X \$15.00 = _____ TOTAL AMOUNT DUE

Participant Numbers:

Preschool _____

Kindergarten _____

Primary _____

Junior _____

Estimation of adults attending: _____

DEADLINE: MONDAY, MARCH 25, 2019

PLEASE mail **ALL** forms (including Group Lists)
along with one (1) church check made out to **ET SDMI** to:

NAZ BLAST
c/o Michael Mayfield
P.O. Box 66
Louisville, TN 37777

STAFF USE:

AMOUNT DUE: _____

AMOUNT RECEIVED: _____

DATE RECEIVED: _____