



# 5<sup>th</sup> / 6<sup>th</sup> Grade Retreat REGISTRATION

(one per family)

Registration Forms must be submitted with the registration fee (\$40.00 each) by **August 30<sup>th</sup>** to:

Michael Mayfield

P.O. Box 66

Louisville, TN 37777

Phone: 865-712-4662

Email: michael@foothillscrc.org

Additional forms available at: [etnazsdmi.com/shift](http://etnazsdmi.com/shift)

### Parent/Legal Guardian Information

Father's Name (or Legal Guardian):			
Address:			
City:	State:	ZIP:	
Phone Number(s) Home:	Work:	Cell:	
Email:			

Mother's Name (or Legal Guardian):			
Address:			
City:	State:	ZIP:	
Phone Number(s) Home:	Work:	Cell:	
Email:			

### Preteen's Information:

**CIRCLE ONE**

Name	Date of Birth	Grade	T-Shirt Size	other
			Y-LG A-SM A-MED A-LG A-XLG A-	
			Y-LG A-SM A-MED A-LG A-XLG A-	
			Y-LG A-SM A-MED A-LG A-XLG A-	

Please note anything you feel our staff needs to know about working with your preteen/preteens. Thank you!


\_\_\_\_\_  
Parent's Name (Please print)

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date