

2010 HOUSEPARTY REGISTRATION FORM

Church _____ City/State _____ Association _____

Arrival Time _____

| AB GIRLS' Name | Age | Joy, Faith, Hope Young Adult Woman | School Grade COMPLETED | Workshop Choices | | Roomate Choice Only ONE please | Allergies / Special needs | First Timer? | High School Graduate? |
|----------------|-----|---------------------------------------|---------------------------|------------------|-------------|-----------------------------------|------------------------------|-----------------|--------------------------|
| | | | | A" 1st, 2nd | B" 1st, 2nd | | | | |
| 1- | | | | | | | | | |
| 2- | | | | | | | | | |
| 3- | | | | | | | | | |
| 4- | | | | | | | | | |
| 5- | | | | | | | | | |
| 6- | | | | | | | | | |
| 7- | | | | | | | | | |
| 8- | | | | | | | | | |
| 9- | | | | | | | | | |
| 10- | | | | | | | | | |
| 11- | | | | | | | | | |
| 12- | | | | | | | | | |
| 13- | | | | | | | | | |
| 14- | | | | | | | | | |
| 15- | | | | | | | | | |

AB GIRLS Advisor - Name, home address, phone, & email address -

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1 Copy to AB GIRLS Regional Coordinator - Cindy Martin, 9345 Palmer Road, North East, PA 16428 814-882-1558 cingmartin@yahoo.com

1 Copy to Houseparty 2010 Registrar - 1st Baptist Church Shinglehouse, 120 Academy Street, Shinglehouse, PA 16748

- _____ Ham
- _____ Turkey
- _____ Peanut Butter/Jelly

Checks payable to Shinglehouse 1st Baptist Church

Cost - \$35 (postmarked by 07/1/2010)

Cost - \$45 (postmarked after 07/2/2010)

Total \$\$ Enclosed _____

Number Attending _____