



2019 DEEP SOUTH YOUTH CONFERENCE // JULY 11-13



EPHESIANS 5:14

## Registration & Medical Release Form

Please Fill Out & Return By:

July 3rd

### Student(s)

Name: \_\_\_\_\_

Student(s) Phone# (If Applicable) \_\_\_\_\_

### Parent(s)/Legal Gaurdian(s)

Name: \_\_\_\_\_

Phone#: \_\_\_\_\_

Email: \_\_\_\_\_

Would you like to be on our parent email list for dates & times of Student Ministry events?

YES/NO (Circle one)

Questions? Contact:

Austin@cclexington.org

Greg@cclexington.org



@cclexington\_students