



Instructions: Please print legibly and bring completed form to the event along with your Registration fee, made payable to "Lao Baptist Youth." Checks & cash only.

Event: _____
Location: _____
Date: _____

Participant Info

First Name Last Name DOB (MM / DD/ YY)
(_____) (_____) Male / Female
Home Phone Mobile Phone Circle above

E-mail address (for special LBY events/news)

How did you hear about this event? Friend/ Church/ Other: _____

Church & Adult Sponsors Info

Church Name Pastor Name

Church Mailing Address City State Zip Code

Adult Sponsor #1 First & Last Name Adult Sponsor #2 First & Last Name

Health / Medical Info

Insurance Company Primary Care Physician

Group Number & Policy Number Medical conditions/ medications currently taking

Emergency Contact Name & Relationship (_____) Emergency Contact Number

Parental / Legal Guardian's Permission

I have read and understood LBY's Rules and Guidelines and hereby grant permission for my child to participate at the stated LBY event. I also approve and entrust the Church and Adult Sponsors listed above to transport, escort, and make reasonable and necessary decisions on my behalf as it pertains to medical and disciplinary actions. In the event that there are any expenses incurred relating to or resulting from my child, I understand that I am the sole responsible party and do not hold LBY.

Parent / Legal Guardian's Signature (if Participant is under 18 years of age) Date Signed

Adult Sponsor #1 or #2's Signature (25 years of age or older) Date Signed

Participant's Signature Date Signed