

**2009 MINNESOTA CONFERENCE ANNUAL MEETING
INDIVIDUAL NON-DELEGATE REGISTRATION FORM**

All Non-Delegates to the Annual Meeting should fill out this form, regardless of age.

FILL OUT BOTH SIDES COMPLETELY

Name _____

Street _____ City _____ State _____ Zip _____

Phone #s: Home(____) _____ Work(____) _____ Cell(____) _____

E-Mail _____

Church Name and City _____

Category: Ordained Lay In Care Commissioned/Licensed Minister

Age: Adult Youth (grades 9-12) Child (Please provide age of child _____)

If registrant is a child, please provide the following information:

Name(s) of Parent/Guardian in attendance: _____

This child may be released to: _____ **Relationship:** _____

This child will use the following programming:

Nursery Care (0-2 years) Preschool (3-5 years) Kindergarten

Grade 1-2 Grade 3-4 Grade 5-8

(Please bring any special items your child may need: blanket, port-a-crib, stroller, diaper bag, etc.)

Does this child have special dietary or other needs that will help to create a positive social and learning environment? If so, please list, or send a confidential email to Grace Anderson at ganderson216@gmail.com. This information will only be shared with those who need to know.

**You must fill out a separate *pink* non-delegate registration form
for each child and each youth (infant – 12th grade).**

I understand that Child Care and Children's Programming is provided as a service by the Minnesota Conference UCC. I understand that the volunteers will provide the best care possible. I will be punctual in picking up my child and will not hold the volunteers responsible for care beyond the times provided. Parent or guardian will not leave premises/CSB grounds without notifying leaders/caregivers.

Parent/Guardian Signature: _____

NOTE: Please bring a washable mug and water bottle, clearly labeled with your name, to reduce our dependency on styrofoam cups.

MEAL REGISTRATION
PLEASE FILL IN AMOUNT FOR ALL ITEMS THAT APPLY

The new Gorecki Conference Center cafeteria will provide two or three choices at each meal, allowing participants to tailor their food selection.

MEALS NEEDED(adult cost/age 10-18 cost/age 0-10 cost)	COST
Friday Lunch (\$10.25 / \$8.25 / \$5.00)	\$ _____
Friday Dinner (\$12.00 / \$9.25 / \$5.50)	\$ _____
Saturday Breakfast (\$9.50 / \$7.00 / \$4.50)	\$ _____
Saturday Lunch (\$10.25 / \$8.25 / \$5.00)	\$ _____
Saturday Dinner (\$12.00 / \$9.25 / \$5.50)	\$ _____
Sunday Breakfast (\$9.50 / \$7.00 / \$4.50)	\$ _____
Sunday Box Lunch (\$8.00 / \$8.00 / \$8.00) Turkey or Hummus (Circle one)	\$ _____
TOTAL FOR MEALS (Includes 7% tax)	\$ _____
Check here if you require Gluten-Free meals _____	

PLEASE FILL IN AMOUNT FOR ALL ITEMS THAT APPLY

(Scholarships available for In Care Students and Retired Clergy – contact the Conference Office)

ADULT NON-DELEGATE REGISTRATION (By May 5 postmark) \$70	\$ _____
ADULT LATE REGISTRATION (After May 5 postmark) \$90	\$ _____
ONE DAY REGISTRATION \$40	\$ _____
CHILD/YOUTH NON-DELEGATE REGISTRATION (0-12th grade) \$35/person	\$ _____
MEALS TOTAL (from other side)	\$ _____
HOUSING TOTAL (From Individual or Family Housing Form) (List child/youth housing on only one Parent/Guardian's Registration)	\$ _____
SWIMMING TICKET \$5/person/swimming time (Swimming will be available Saturday, 6:00-8:00am and 5:00-6:00pm; children and youth must have adult supervision)	\$ _____
TOTAL AMOUNT DUE WITH THIS FORM	\$ _____

I understand that internet access will be available during the conference meeting this year and I expect to use it.

**To take advantage of on-time registration fee, a check MUST be received with this registration
 PARTIAL REGISTRATIONS WILL NOT BE ACCEPTED. DO NOT FAX**

Make checks payable to and return to:
 (Registration is incomplete until payment is received)

Minnesota Conference UCC
 122 W Franklin #323, Mpls. MN 55404

REGISTRATION DEADLINE: POSTMARKED BY MAY 5, 2009

We cannot guarantee meals or housing for registrations received after May 29.

***Register online using VISA or MasterCard,
 at www.uccmn.org, "Annual Meeting"***