



# Learn & Serve Twenty Ten Summer Registration Form

## 1. Contact information

- o This group has attended a Learn & Serve retreat or camp in the past.  
If so, what year(s)? \_\_\_\_\_
- o This will be the first time my group has attended a Learn & Serve retreat or camp.

Primary Contact Name: \_\_\_\_\_

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

Please send correspondence to: o My church o My home

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

## 2. select your week

Please write a "1" for first choice and a "2" as an alternate choice in case the first is full.

Week 1 May 30-June 4 _____	Week 5 July 4-July 9 _____
Week 2 June 6-June 11 _____	Week 6 July 11-July 16 _____
Week 3 June 13-June 18 _____	Week 7 July 18-July 23 _____
Week 4 June 20-June 25 _____	

## 3. Reserve Spaces

Please register a minimum of one adult for every five students (1:5). If you register both males and females, sign up at least one adult male and one adult female.

Spaces for Participants under age 21	_____
Spaces for Adults	+ _____
Total Spaces Reserved	_____

## 4. Deposit Payment: \$50 x \_\_\_\_\_ total registered participants = Amount due

Registration is \$275.00 per participant. **A \$50 non-refundable deposit (U.S. funds) is required for each participant. Deposits are not transferable to Learn & Serve balance. Please only register the number of spaces you intend to fill.** You may add more to your group until the week reaches capacity by calling 256.396.2015.

- o Check enclosed to SIFAT \$ \_\_\_\_\_ Check # / M.O.# \_\_\_\_\_
- o Please make check payable to SIFAT and include your church name and Learn & Serve on the check

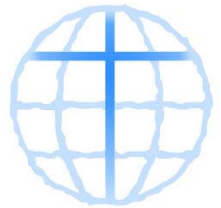
5. How did you hear about SIFAT and/or Learn & Serve?

- \_\_\_\_\_ Online Search (Google, Yahoo, etc.)
- \_\_\_\_\_ Denominational Material (Newsletter, Meetings, etc.)
- \_\_\_\_\_ Word-of-mouth (From a friend, minister, other)  
Do you remember who told you? \_\_\_\_\_
- \_\_\_\_\_ Other: \_\_\_\_\_

6. Confirmation

By registering for L&S, I understand and agree to the procedures and fee payments as stated:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



LEARN&SERVE

SIFAT Learn & Serve  
2944 County Road 113  
Lineville, AL 36266  
256.396.2015  
learnandserve@sifat.org  
www.sifat.org/learnandserve