

2019 AYCLA Conference

Registration Form

(Please Print)

First Name _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip _____

Email Address _____

Home Phone _____ Cell Phone _____

Spouse Name _____

Local Church _____ City _____

Your Status: (Choose one)

___ Full Time Student Pastor

___ Full Time Children's Pastor

___ Part Time Student Pastor

___ Part Time Children's Pastor

___ Volunteer Student Pastor

___ Volunteer Children's Pastor

___ Youth Staff Member

___ Children's Staff Member

Names of Volunteer Staff

(You may bring team members. Please give names and see Team Pricing below.)

Total Attendees _____

Total Amount Due _____

On-site Housing Request (no additional cost):

Number of Married Couples _____

Number of Female Individuals _____

Number of Male Individuals _____

COST

Single.....*\$35

Married Couple*\$60

AFTER AUGUST 5

Single.....\$50

Married Couple\$75

TEAM PRICING

\$25 each for five or more team members

SEND CHECK TO

ALABAMA STATE OFFICE

AYCLA CONFERENCE

PO Box 19765

Birmingham, AL 35219

**Early Bird Registration must be received by August 5, 2019*

Please call 205-942-2090 Ext 3 with any questions

Fax: 205.945.0710 Email: youthsec@alacoghq.org