

Steubenville North I Youth Conference Registration Form

Please include this form with your deposit. Permission forms will be sent to registered participants closer to the event.

Name: _____

Address: _____

City/State/ZIP: _____

Phone: _____ Grade ('06-'07): _____

Email address: _____

Parish: City/State: _____

Parent/Guardian Name(s): _____

Parent/Guardian Email: _____

Parent/Guardian Phone Numbers:

Home: _____

Work: _____

Cell: _____

Roommate Request: 1. _____

2. _____

Have you attended a Steubenville Summer High School Youth Conference before? ___Yes ___No

T-Shirt Size: ___S ___M ___L ___XL ___XXL

The logo for Springtime of Hope features the words "Springtime of Hope" in a cursive script. A small flower icon is positioned above the letter 'i' in "Springtime".

Please mail registration form and deposit to:

Springtime of Hope ©
3089 Spring Valley Road
Dubuque, IA 52001