



Registration Form

Please fill out one form for each youth participant. Send the completed form to kardecradio@gmail.com.

First Name		Last Name	
DOB			
Address			
Email (if applicable)		Phone	
Parent/Guardian Name*		Relationship to Youth*	
Email (if applicable)		Cell Phone	
Home Phone			
Please indicate how many parents/guardians are planning to attend the event (include names):			
Please indicate how many rooms you would you like to request at \$89/night (special rate) and the names of the guests:			
<p>Comments/Notes Please list any other important information (Special needs, learning difficulties, persons not to contact youth, specific behavioral patterns, important medical information, allergies, dietary restrictions, etc.)</p>			

Signature of Youth Participant (required if 18 or over): _____

Parent/Guardian Signature* _____

Date _____

*For participants under 18 years of age.