

# Zion Lutheran Youth Retreat

## Individual Registration Form

marshallretreat.blogspot.com

**\$75.00** Registration  
Fee Per Attendee  
Make Check Payable  
to "Zion Lutheran  
Church"

Name: \_\_\_\_\_ - -

Home Address: \_\_\_\_\_  
Last First MI Date of Birth  
 Male  Female

Street \_\_\_\_\_  
Phone Number \_\_\_\_\_

City ST Zip E-mail address  
 Youth Participant  College Student  Parent/Chaperone  Pastor

Parents' Names (minors only): \_\_\_\_\_

Contact Information: \_\_\_\_\_  
(if different from above) Street Phone Number

( ) -  
Cell Phone City ST Zip E-mail address

Disabilities, dietary or other special needs (Please describe, attach additional pages if necessary):

Congregation Information: \_\_\_\_\_

Name City State  
I intend to receive the Lord's Supper at the Divine Service on Sunday:  No  Yes  
- -

Participant's Signature Date

### Parent/Guardian Section *(participants under 18 years of age only)*

I give permission for \_\_\_\_\_ to attend the ZION YOUTH RETREAT at MARSHALL, MICHIGAN (October 5-7, 2007). I assume all responsibility and liability for injury to said minor. I also give Zion Lutheran Church, Marshall, MI, permission to use any still or video images of said minor in retreat publicity and news releases.

Parent's/Guardian's Signature Date

### Pastor's Section

I have reviewed this form, and approve this individual's attendance at the retreat.  No  Yes  
This individual is a communicant Lutheran in fellowship with the LC-MS and may partake in the Lord's Supper.  No  Yes

Pastor's Signature Date

Return multiple registrants' forms with group registration form and one check made payable to Zion Lutheran Church \$75.00 per individual, both youth and chaperones.

More info at: [marshallretreat.blogspot.com](http://marshallretreat.blogspot.com)

Return forms and check to:

**Erich Heidenreich, DDS**  
128 W. Michigan Ave.  
Marshall, MI 49068