

**PRESBYTERIAN YOUTH TRIENNIUM
Applicant/Participant Information Form**



Personal Information

Name: _____

Badge name: (if different from your given name) _____

Age you will be on July 20, 2010: _____ Gender: M / F T-shirt size: _____

Classification: Adult Advisor ___ Ambassador ___ Care Giver ___ Global Partner ___ Youth ___

Ethnicity: (optional) _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____

E-mail address: _____

Home church: _____

Parent / Guardian Names: _____ Phone: _____

Parent Email: _____

Application Section (If this form is being used as an application)

Church involvement: _____

School or Community involvement: _____

Why do you want to attend PYT 2010? _____

Roommate Request: (must be mutual) _____

Special Needs: _____

Special Needs Include: Insulin Dependent, Prescription Meds on a timed basis, Refrigerator for meds or special foods, Wheelchair/Electric Cart Access, Accessible residence hall, mobility (distance walking issues).

***This form is a template. Please feel free to adapt this document for your presbytery or church. This form will help registrars and/or Triennium planning committees capture critical information that they can use for completing registration, event preparation and essential communication.**

PLEASE SEND COMPLETED APPLICATIONS TO:

Nancy DeStefano
907 National Road
Wheeling, WV 26003

If you have additional questions, please call Nancy at (304) 232-3490.