

Group Registration

At this time, we would like to express our shared gratitude for your eagerness to be apart of an experience that is geared towards equipping, encouraging, enlightening, and empowering the youth of today. We hope that this step is only the beginning to what we hope to be an enjoyable, uplifting, and spiritually engaging experience. Be sure to add yourself to the Awestruck Mailing List at www.awestruckfestival.com! Also, inform your youth director about Project Awestruck and the Awestruck Experience for Youth Groups!

Group		E-mail Address			Leader's Name		
Address			City		State		Zip
Contact Person		Phone Number		Emergency Contact		Phone Number	
My congregation would love to donate to this cause!							
My group would be interested in attending the following breakout sessions if available							
Purity		Missions		Music		Relationships	
Popular Culture		Movies		Discipleship		My Community	
College		Media		Discipleshipulation		Sports	
(to vote, choose three)							
I plan to attend the following Awestruck events:							
#	\$\$	Event	Start Date	End Date	Price	Description	Open To
		Awestruck University	July 9	July 11	\$55	Servant Leadership Training	College Individuals
		Project Awestruck: Community Service 1	July 11	July 15	\$60	Community Service Projects	High School Groups
		Awestruck Festival: Forever	July 15	July 17	\$60-\$85*	Music Festival with Outdoor Sporting Events, Camp Activities	All
		Project Awestruck: Community Service 2	July 17	July 21	\$60	Community Service Projects	High School Groups
* Awestruck Festival: \$60 for Tent Camping Before April 1 st , \$70 After; \$75 for Cabin Before April 1 st , \$85 after!							
How did you hear about Awestruck?							
Shirt Size		Number of Past Awestrucks?			Do you plan to stay in a cabin or a tent?		
Total Amount:		Date:			Cabin/Tent Placement (Awestruck Use Only)		

Individuals in Group

IMPORTANT: Individual information is not needed until May 1st. There will be a \$5 fee per participant for those who miss the May 1st deadline. This is effective for all groups who sign up after May 1st. All participants are also required to fill out and submit a Camp Lakeview Medical Form with a copy of their Health Insurance Card, for safety purposes and Camp Lakeview use only. Group leaders should also keep a copy of these records during the Awestruck Experience. Copy this form as necessary.

Participant's Name: _____ E-Mail: _____ Address: _____ City, State, Zip: _____ T Shirt Size: _____ Emergency Contact Person: _____ Phone Number: _____	Participant's Name: _____ E-Mail: _____ Address: _____ City, State, Zip: _____ T Shirt Size: _____ Emergency Contact Person: _____ Phone Number: _____
Participant's Name: _____ E-Mail: _____ Address: _____ City, State, Zip: _____ T Shirt Size: _____ Emergency Contact Person: _____ Phone Number: _____	Participant's Name: _____ E-Mail: _____ Address: _____ City, State, Zip: _____ T Shirt Size: _____ Emergency Contact Person: _____ Phone Number: _____
Participant's Name: _____ E-Mail: _____ Address: _____ City, State, Zip: _____ Phone Number: _____ Emergency Contact Person: _____ Phone Number: _____	Participant's Name: _____ E-Mail: _____ Address: _____ City, State, Zip: _____ Phone Number: _____ Emergency Contact Person: _____ Phone Number: _____
Participant's Name: _____ E-Mail: _____ Address: _____ City, State, Zip: _____ T Shirt Size: _____ Emergency Contact Person: _____ Phone Number: _____	Participant's Name: _____ E-Mail: _____ Address: _____ City, State, Zip: _____ T Shirt Size: _____ Emergency Contact Person: _____ Phone Number: _____
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