

Youth Registration Form: Winter and Spring 2017

Mail to: THE POWELL HOUSE YOUTH PROGRAM, 524 PITT HALL ROAD, OLD CHATHAM, NY, 12136-3410.

Register me for the indicated conferences. I have enclosed a **\$30 deposit for each conference.** There is an additional fee of **\$30** for registrations received **one week or less before a conference.**

4th & 5th Grade	6th – 8th Grade	9th – 12th Grade
____ Feb 17–19: When the Spirit Says ____ Apr 7–9: Getting Started	____ Jan 13-15: Safety Pins and... ____ Mar 10-12: Give Me Space	____ Jan 27-29: When it's Quiet ____ Mar 17-19: Thinking Inside the Box ____ Jul 13-16: Unwinding
3rd & 4th with an Adult	7th – 12th Grade	11th-12th & Young Adults
____ June 9-11: Inside-Outside	____ May 26-28: EarthSong	____ Feb 10-12: Breathe, Just Breathe
5th – 7th Grade		
____ May 12-14: Orient Yourself		

Number of Conferences Registering for ____ Total Deposit Enclosed (\$30 per conference) \$ ____

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Name _____ Quaker Meeting _____

Address _____ City _____ State _____ Zip _____

Phone _____ Birth Date _____ Grade _____ Sex _____

Youth E-Mail Address _____

New Mailing Address ____ New Phone ____ Medical Concerns* ____

No Red Meat ____ Vegetarian ____ Vegan ____ Food Allergy* ____

*Please Explain _____

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Include me on the **CARPOOL** list ____ Include me on the **TRAIN** list ____

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\$30 First Timer Discount _____ or Requesting \$ _____ per conference in financial assistance
I am enclosing a \$ _____ donation to help others attend Powell House.

Parent Signature _____ **Printed Name** _____

Send a Youth Brochure to: _____ Grade _____
Address: _____

