



STEUBENVILLE WEST REGISTRATION FORM & PAYMENT INFORMATION JULY 23-25, 2010



1. Group Leader's Information (Please print legibly)

Group Leader's Name: _____

Parish Name: _____

Parish Address: _____

City: _____ State: _____ Zip: _____

Contact Number: (____) _____

Email Address: _____

***You must provide an email address. Event updates will be sent via email.**

I have read, understand, and agree to all general policies including the refund policy as outlined in the registration packet.

Group Leader's Signature (required) Date

2. Registration Fees:

In order to make a reservation, a **\$35.00 non-transferable, non-refundable deposit** is due for each attendee. *Priests hearing confessions during the conference will NOT be charged a deposit or registration fee.*

Balances:

On Campus Housing:

- Early Bird Balance (payment RECEIVED by May 15): \$125
- Regular Balance (payment RECEIVED after May 15): \$140

Off Campus Housing:

- Early Bird Balance (payment RECEIVED by May 15): \$90
- Regular Balance (payment RECEIVED after May 15): \$105

ALL PAYMENTS ARE DUE BY JUNE 15, 2010

3. Who is Attending?

Each group attending must have one adult for every six youth. Youth **MUST** be high school age from incoming freshman to outgoing seniors.

Male Adults _____ Female Adults: _____

Male Youth: _____ Female Youth: _____

Priests: _____

Group Total: _____

Special Needs:

4. Payment Information: (Please do not include your priest in this fee)

Deposit Due:		X	\$35	=	\$
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On Campus Housing:

Balance Due (Before May 15)		X	\$125	=	\$
Balance Due (After May 15)		X	\$140	=	\$
Group Total:				=	\$

Off Campus Housing:

Balance Due (Before May 15)		X	\$90	=	\$
Balance Due (After May 15)		X	\$105	=	\$
Group Total:				=	\$

Additional Fees

Bus Driver Room:		X	\$70	=	\$
Conference T-shirts:		X	\$12	=	\$

Shirt Sizes: S _____ M _____ L _____ XL _____ XXL _____

Total Amount:		=	\$
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Check is enclosed for \$ _____

- Please make checks payable to: Life Teen
- Please be sure to include group leader's name on all payments

Credit Card Payments

Circle one: Visa MC AmEx Discover

Card Number: _____

Name on Card: _____

Exp. Date: _____

Credit Card Billing Zip Code: _____

Send this form along with your payment to: (please remit a copy of this form with each payment)

Life Teen Inc.
Attn: Steubenville West
2222 S. Dobson Rd. #601 • Mesa, AZ 85202

For more information about Steubenville West:
catholicyouthministry.com/experience

Cancellation Policy: \$35.00 deposits are nonrefundable/nontransferable. Cancellations after June 15th will result in NO REFUNDS on all payments.