**Zion Mission Trip 2016**

**Registration and Deposit**

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2015-2016 Grade: \_\_\_\_\_\_\_\_\_\_**

**Parent(s) Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent(s) phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Registration Covenant:**

* *I want to participate in this event so that I can grow in faith and serve my neighbor in Jesus’ name. I have read and understand the trip participant expectations, including full engagement with trip planning meetings, fundraisers, and the life of my congregation.*
* *If a schedule conflict prevents me from attending any of the planning meetings, I will contact Pastor Andrea in advance and make arrangements with her to meet and get caught up on whatever I have missed.*
* *I understand that my $50 deposit is non-refundable.*

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Registration Deadline is Sunday, March 6.** Return this Registration form with your $50 trip deposit (payable to Zion Youth Fund) to the church office or Pastor Andrea. If you have any questions, please call/text Pastor Andrea: 507-402-1114

Zion Lutheran Church believes that financial limitations should not prevent any student from participating in youth trips. Talk with Pastor Andrea to discuss scholarship availability.