

Date: _____

FORM #1

GROUP LEADER REGISTRATION COVER SHEET

2013 National Catholic Youth Conference



Parish/School: _____ Group Leader Name: _____

Contact Phone: _____ Email: _____

Address: _____ City: _____ Zip: _____

Deanery: _____ Parish Number: _____

Total number of **Youth*** (grades 9-12): _____ Total number of **Adult Chaperones*** (21 and older): _____

***Please note that you MUST have 1 (one) Adult Chaperone registered for every 6 (six) Youth.**

T-Shirts: S _____ M _____ L _____ XL _____ 2X-L _____ 3X-L _____ **TOTAL T-Shirts:** _____

So that we can assess our overnight accommodation needs, please let us know of your groups plans (✓):

Our group will need overnight accommodations **Thursday – Saturday** (Packages A, B, or C)*

-OR-

Our group will need overnight accommodations **Wednesday – Saturday** (Packages D, E, or F)*

-OR-

Our group will be commuting every day to the conference (Package G)

**Overnight accommodations at the JW Marriott are filled on a first come, first served basis. Due to external deadlines regarding room blocks, it is imperative that we know (and receive a deposit for) the total number of people requiring these accommodations. Please make sure your need matches the information you submit in the payment box below. Note: if you do not completely fill a room, we will make every effort to fill open spaces. If we are unable, the parish/school will be responsible for the full cost of the room.*

Yes, our group is planning to attend the Pre-NCYC Concert on Wednesday, November 20, 2013 (7:30pm - 9:30pm)

Registration Deposit Payment Options (✓):

Check: (one check made payable to **“Archdiocese of Indianapolis”**)

-OR-

Parish/School Assessment: (attach completed **Parish/School Payment Assessment Form (Form 8)**)

Total number of participants (Youth and Adult Chaperone): _____ X \$100.00 deposit: \$ _____

The sum of these two lines must equal the total number of participants and deposits above. { # of participants currently registered online: _____
of spaces purchased without registrants**: _____

TOTAL PAYMENT: = \$ _____

**** Please note:** In order to reserve additional spots and overnight accommodations, you will be required to include the deposit for all additional spots. Please remember to account for enough Adult Chaperones for the size of your group. By requesting additional spots, you are committing to these spots and will be required to pay the final balance on these spots regardless of whether or not you are able to fill those spots. See the FAQ's for more details.

This form (Form 1) is to be filled out by the Group Leader

Due Date: June 12, 2013

Don't forget to attach the following: Deposit (Check or Form 8), Participant Forms (9, 10 or 10S, 11 or 11S), and Form 6