

## 2008 New England Chinese Christian Conference (NECCC 2008)

[www.fcccc.net/neccc](http://www.fcccc.net/neccc)

### English Ministry Registration Form

Check # \_\_\_\_\_

Amount \$ \_\_\_\_\_

#### Instructions

1. Minimum age is 12 years old.
2. This form must be completed in order to be processed.
3. Please check the corresponding boxes for meals and lodging.
4. All forms must be postmarked or submitted to church coordinators by **7/28/08**.  
The meals and lodging are not guaranteed if you register past the deadline.
5. Return this form with the registration fee to:  
**NECCC 2008, 348 High Ridge Road, Stamford, CT 06905**
6. The registration fee is \$75/Adt, \$40/Chd(4-11), Max \$225/Family.
7. Make checks payable to:  
Chinese Baptist Church of Greater Hartford (or **CBCGH**), Memo: NECCC'08
8. The conference cost for meals and lodging is given on a free will basis.

Please use two checks for the offering: One is designated for room and board, which is not tax deductible. The other one is designated for free offering which is tax deductible and NECCC will issue a receipt.

Last Name			First Name				MI.				
Age:			Sex: M <input type="checkbox"/> F <input type="checkbox"/>								
Street Address							Apt				
City					State		Zip				
Tel (H) ( ) -			e-mail:								
High School <input type="checkbox"/> College/Career <input type="checkbox"/>			Christian <input type="checkbox"/>		# Years						
Pastor/Youth Director					Tel: ( ) -						
Church/Fellowship					E-mail						
Street Address											
City			State			Zip					
8/7		8/8				8/9				8/10	
Lodge	Dinner	Lodge	Brkfast	Lunch	Dinner	Lodge	Brkfast	Lunch	Dinner	Brkfast	Lunch

**FOR PARTICIPANTS UNDER 18 YEARS OLD:** In view that this Conference holds to Christian standards and values, it is expected that each participant conduct himself/herself accordingly. Therefore I agree to abide the rules and guideline of the Conference.

**Participant's Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

**PARENT/GUARDIAN'S PERMISSION:** Permission is hereby granted for my son/daughter, \_\_\_\_\_ to attend the NECCC (8/7-8/10, 2008) at Bryant University, Rhode Island. In case of emergency, please contact \_\_\_\_\_ at the phone # \_\_\_\_\_ or \_\_\_\_\_ at the Conference site. If the above person(s) could not be reached, I give permission for my son/daughter to be treated by a physician and/or be hospitalized. **Parent/Guardian's Signature:** \_\_\_\_\_ Parent/Guardian Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_