

Participant Pre-Registration Form

This form will need to be completed by all participants attending MPACT. Upon completion, please return this form to your Youth Minister along with a \$50 non-refundable deposit fee by May 1st. The deposit will reserve your spot. Registrations received between May 1st and June 1st will require a \$65 non-refundable deposit. Registrations received after June 1st require \$85 non-refundable deposit.

Last Name:	First Na	ame:	Initial:
Circle the following that app		S, M, L, XL, XXL, XXXL, XX	ΚΧL
You must be entering 7th	grade and above to attend a	n MPACT Mission Trip.	
Grade Completed: 6	th 7th 8th 9th 10th 11	Ith 12th, College, Adult	Sponsor
Attended MPACT be	fore?		
If you will be an Adult Drive	r during MPACT Mission week, p	please complete the information b	pelow.
Bringing a vehicle?	Y N	Number of Seats:	(including driver)
Adult Leader e-mail:			·
Adult Leader Cell Ph	one: (used for phone lis	st at MPACT)	
Adult Skill Level 1-5 (1 = lowest & 5 = highest	t)	
Please indicate # in blank be Painting Yard V		_ Chain Saw Power \	Washing Gen. Cleanup
	•	in registering your group T must be completed on	online. This is not an official line.
	2	•	
For Youth Medical	n Minister Use Only Form: Y/N	☐ Deposit F	Received/May 1st Received/June 1st Received/June 1st
	on Form: Y/N		ed Online/May 1st
Leadersh	ip Grid: 1 2 3	☐ Balance l	Paid/June 1st