

Registration Begins On
Monday, October 1, 2018 at 12 PM MST!

This form can be used to register an individual or group. When registering a group, you must indicate the number of registrations required and include complete, accurate contact information.

No refunds will be given once registration(s) payment has been processed.

You will receive a confirmation package approximately 3 weeks after your registration has been processed. Your confirmation package will include your wristband(s), which is your admission to YCAB 2019 and your ticket(s) that indicates your seat number(s).

Please mail or email this completed form to:

Extreme Dream Ministries Office
PO Box 92055 Meadow Brook, Edmonton, AB T6T 1N1
info@extremedream.ca

Registration(s) will not be processed unless accompanied by complete payment.

CONTACT INFORMATION (please print clearly)

Surname: First Name:

Mailing Address:

City: Prov.: P.C.: M F Age:

Daytime Phone: Evening Phone: Fax:

Email: I am a: Youth Pastor Youth Leader Chaperone Student

CHURCH INFORMATION

Church Name:

Denomination:

PAYMENT INFORMATION

Choose one: Group Registration - # of Tickets Required: _____ Individual Registration

\$125 Oct 1, 12:00pm
 \$150 Oct 2, 1:00pm
 \$175 Feb 1
 \$200 May 15

Total amount owing: \$ _____

Please make ONE payment per group

Method (check one): Cheque (payable to Extreme Dream Ministries)
 Credit Card (we accept Visa and MasterCard)

I, _____, authorize Extreme Dream Ministries to process \$ _____ on my credit card for payment of YCAB 2019 registration(s).

Cardholder Signature

Credit Card Number

Expiry Date

Security Code

The credit card information in this shaded box will be destroyed upon payment approval.