

## REGISTRATION FORM & PERSONAL COVENANT

### LAB REGISTRATION FOR (Check One)

\_\_\_\_\_ BASIC— *completed 8th Grade*  
\_\_\_\_\_ ADVANCED—*completed Basic*  
\_\_\_\_\_ PHASE 3—*entry point for H.S. Jr. or Sr.*  
\_\_\_\_\_ STEP 4<sup>th</sup>—*completed Phase 3*  
\_\_\_\_\_ ADULT LAB —*over age 22*  
\_\_\_\_\_ CROSSROADS—*H.S. graduate 18-22 yrs. old*

### Grade Entering This Fall

<u>High School</u>	<u>College</u>
_____ Fr	_____ Fr
_____ So	_____ So
_____ Jr	_____ Jr
_____ Sr	_____ Sr
_____ Graduated High School	_____ Not attending College
_____ Adult	

### **VERY IMPORTANT – TYPE OR PRINT VERY, VERY NEATLY USING A BLACK PEN**

Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

I come to participate as part of a Community, gathering together to learn leadership and planning skills, and to grow and deepen my personal faith;

I realize that my actions reflect upon the whole Community of Lab;

I realize that decisions that I make about my personal behavior during the week of Leadership Lab should not be for the benefit of self, but for the betterment of the Community;

### **As a Child of God, I agree to the following:**

1. If I am under the age of 18, I will not smoke at Leadership lab. If I am over the age of 18 and I must smoke, I will do so in a discrete manner, away from other Lab participants;
2. I understand that strong personal relationships may develop during this week; therefore, I will refrain from acts towards others, which may appear to be or are sexual in nature or overly aggressive in manner;
3. I will dress in a manner appropriate for a Christian Community. I have read the dress code policy and will abide by it. I understand that the Directors reserve the right to define what is appropriate;
4. I agree that lab is a closed community and that my friends are not allowed to visit during the week;
5. I understand that I may not come late to lab or leave before the ending celebration on Saturday without prior consent of the Directors. I agree to put my request to arrive late or leave early in writing and have it signed by a parent/guardian and my pastor;
6. I agree to participate in all scheduled Lab events;
7. I agree to abide by all other guidelines as set forth in the Community Guidelines For Leadership Lab.

Dated \_\_\_\_\_, 2012.

X \_\_\_\_\_

**LABBERS SIGNATURE**

X \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE**

**PASTOR/YOUTH LEADER PLEASE READ AND SIGN -- THIS MUST BE COMPLETED FULLY FOR REGISTRATION TO BE PROCESSED!!!** I recommend the applicant and agree to review and evaluate the experience with him/her upon return home.

Signature Pastor/Youth Leader \_\_\_\_\_

Synod (CS/N/M/O) \_\_\_\_\_

Central/Southern, Northern, Metro or Other

Congregation \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Church Phone No. \_\_\_\_\_ Church Fax No. \_\_\_\_\_

**PAYMENT in full due with registration. CHECKS PAYABLE TO LEADERSHIP LAB.**

MAIL COMPLETED FORM & PAYMENT TO:

Cindy Svanda ---P.O. Box 158 ---- Ava, IL 62907 --- Phone – 618 - 687-7310 (cell)

**YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT**

**Postmarked By 6/30**

\$350 Fee in Full \_\_\_\_\_

\$15 T-shirt \_\_\_\_\_

TOTAL DUE \_\_\_\_\_

**Sizes (S - 4X) \_\_\_\_\_**

(If no size is marked a L will be ordered)

**Early Bird Registration Fee: Postmarked By 5/15/2012**

Early Registration Fee Due in Full \$325.00 \_\_\_\_\_

T-Shirt – Due in Full w/Registration \$ 15.00 \_\_\_\_\_

TOTAL DUE \_\_\_\_\_

### **INTERNAL USE ONLY:**

Church Check No. \_\_\_\_\_ Amount \$ \_\_\_\_\_

Personal Check No. \_\_\_\_\_ Amount \$ \_\_\_\_\_