

# YAL DC Weekend 2006 Registration Form

**November 9<sup>th</sup> – 13<sup>th</sup>, 2006**

This registration form is to be used by registrants wishing to pay by check who do not wish to enter their information online. All registrants wishing to pay by credit card must register via the secure online registration form found at **DCGreeks.com** at <https://www.dcgreeks.com/yaldcweekend> (Additional \$5 credit card processing fee per registration will apply.) Registrants wishing to pay by check may also expedite their registration by registering online via **DCGreeks.com** and mailing in the completed forms with their check, without incurring the additional credit card processing fee.

First Name	Middle Name	Last Name	Suffix
<b>Street Address</b> 			
<b>Street Address (2<sup>nd</sup> Line)</b> 			
City	State	ZIP	
<b>Date of Birth</b>		<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Home Phone</b>	<b>Cell Phone</b>	<b>Email Address</b>	
<b>Emergency Contact's Name</b>		<b>Emergency Contact's Phone</b>	
<b>How did you hear about this event?</b>		<b>How many previous YAL DC Weekends have you attended?</b>	
<input type="checkbox"/> A friend or relative <input type="checkbox"/> DCGreeks.com <input type="checkbox"/> Priest <input type="checkbox"/> Another Website <input type="checkbox"/> Local YAL <input type="checkbox"/> Other: <input type="checkbox"/> Flyer			
<b>Select your Registration Package:</b>			
<b>Early Bird Registration (Must be postmarked on or before 8/31/06)</b>	<b>Regular Registration (Must be postmarked on or before 11/8/06)</b>	<b>Walk-Up Registration</b>	
<input type="checkbox"/> \$40: 25 years-old and under <input type="checkbox"/> \$55: 26 years-old and over <input type="checkbox"/> \$50: Saturday Night Dance Only	<input type="checkbox"/> \$75: All Registrants <input type="checkbox"/> \$50: Saturday Night Dance Only	<input type="checkbox"/> \$105: All Registrants <input type="checkbox"/> \$50: Saturday Night Dance Only	
<b>Total Enclosed (Checks may include multiple registration fees.)</b>	<b>Payer's Name as it appears on the Check</b>	<b>Check Number</b>	
\$			
<b>LIABILITY WAIVER</b>			
<p>By signing below, I expressly acknowledge that I am holding harmless the organizers of the YAL Washington, DC Weekend (including but not limited to the DC/MD/VA YAL Committee "YAL DC Weekend"), their respective churches, their employees and agents, and DCGreeks.com, LLC, its employees, managers, owners and agents, from any and all liability connected with my travel to and participation in all events sponsored by the YAL DC Weekend Planning Committee. I understand that my registration will not be accepted without this acknowledgement.</p>			
<b>Legal Signature</b>		<b>Date</b>	

Please mail this form, along with check or money order payable to "**DC/MD/VA YAL**" to:

YAL DC Weekend  
105 Twelve Oaks Drive  
Gaithersburg, MD 20878

Each person must fill out his or her own individual form. Multiple registration fees may be included on a single check or money order.