

2019 Kids' Breakaway Church Application

CHURCH NAME: _____

CHURCH CITY: _____

GROUP CONTACT PERSON: _____

CONTACT PHONE NUMBER: _____

WEEKEND: #1 #2 (PLEASE CIRCLE)

CONTACT EMAIL: _____

BOYS' NAMES	AGE	T-SHIRT SIZE	PAYMENT AMOUNT	GIRLS' NAMES	AGE	T-SHIRT SIZE	PAYMENT AMOUNT
1				1			
2				2			
3				3			
4				4			
5				5			
6				6			
7				7			
CHAPERONE #1 (PRINT BELOW)				CHAPERONE #1 (PRINT BELOW)			
BOYS' NAMES	AGE	T-SHIRT SIZE	PAYMENT AMOUNT	GIRLS' NAMES	AGE	T-SHIRT SIZE	PAYMENT AMOUNT
1				1			
2				2			
3				3			
4				4			
5				5			
6				6			
7				7			
CHAPERONE #2 (PRINT BELOW)				CHAPERONE #2 (PRINT BELOW)			

PLEASE SEND ONE CHECK MADE PAYABLE TO: PENNDL. IF YOU HAVE ANY QUESTIONS, PLEASE CALL: (717) 795-5921.