

REGISTRATION FOR CHANGE AGENTS '09

What Would Jesus Burn

YFC Cyara (Magaliesberg)

13-16 August 2009

*Please complete and fax this form and your proof of payment to
Jean MacCallum at 086 622 7027, or email it to jean@changeagents.co.za*

*No registration will be processed without proof of payment.
Registrations close on 7th August*

First Name: _____ Surname: _____
Gender: _____ Age: _____ Cell: _____
Email Address: _____
Name of your Church/Organisation: _____
Suburb/City: _____
Ministry Position: _____
(Tick one) Full-time _____ Part-time _____ Volunteer _____
I work with: Children (Gr 7 & below) _____ Youth (highschool) _____ Young Adults (ages 18+) _____
In case of emergency, please contact:
Person: _____ Cell: _____
Allergies/Medical conditions: _____
Attending: Thurs 13 th to Sun 16 th (R495) _____ Fri 14 th – Sun 16 th : (R390) _____
Amount paid: R _____ Payment Method: _____
I, _____, hereby release the Change Agents leadership team and YFC Cyara from liability for any injury, accident, illness, or property loss that may occur as a result of my participation in Change Agents 2009.
_____ Signature
_____ Date

Bank Details

Bank: ABSA

Branch Code: 632905

Account Type: Cheque

Account No: 4068363385

Account Name: Change Agents