

2009 New England Chinese Christian Conference (NECCC 2009)

www.neccc.net

English Ministry Registration Form

Check # _____

Amount \$ _____

Instructions

1. Minimum age is 12 years old.
2. This form and the Liability Release must be completed in order to be processed.
3. Please check (x) the corresponding boxes for meals and lodging.
4. All forms must be postmarked or submitted to church coordinators by **8/2/09**.
The meals and lodging are not guaranteed if you register past the deadline.
5. The host university requires a payment of refundable cash deposit (\$20~30) for keys at the time of check-in (Hall 16, 1-2:50 pm, Aug 14, 2009)
6. Return this form with the registration fee to:
NECCC 2009, 348 High Ridge Road, Stamford, CT 06905
7. The registration fee is \$75/Adt, \$40/Chd(4-11), Max \$225/Family.
8. Make checks payable to:
Chinese Baptist Church of Greater Hartford (or **CBCGH**), Memo: **NECCC'09**
9. The conference cost for meals and lodging is given on a free will basis.
10. For more **important** instructions, **please see the next page.**

Last Name		First Name				MI.	
Age:		Sex: M <input type="checkbox"/>		F <input type="checkbox"/>			
Street Address						Apt	
City				State		Zip	
Tel (H) () -		e-mail:					
High School <input type="checkbox"/>		College/Career <input type="checkbox"/>		Christian <input type="checkbox"/>		# Years	
Pastor/Youth Director				Tel: () -			
Church/Fellowship				E-mail			
Street Address							
City				State		Zip	
8/14		8/15				8/16	
Dinner	Lodge	Brkfast	Lunch	Dinner	Lodge	Brkfast	Lunch

PERMISSION for MEDICAL TREATMENT: FOR PARTICIPANTS UNDER 18 YEARS OLD: In view that this Conference holds to Christian standards and values, it is expected that each participant conduct himself/herself accordingly. Therefore I agree to abide the rules and guideline of the Conference.

Participant's Signature: _____ Date: _____

PARENT/GUARDIAN'S PERMISSION: Permission is hereby granted for my son/daughter, _____ to attend the NECCC (8/14-8/16, 2009) at Bryant University, Rhode Island. In case of emergency, please contact _____ at the phone # _____ or _____ at the Conference site. If the above person(s) could not be reached, I give permission for my son/daughter to be treated by a physician and/or be hospitalized. **Parent/Guardian's Signature:** _____ Parent/Guardian Name (Print): _____ Date: _____

Separate "Liability Release, Covenant Not to Sue and Indemnity Agreement" must be completed and returned in order to be processed.

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(Please return the completed forms on the first page, and retain this page for reference)

Registration Instructions:

1. Meal and Dorm Registration Information: Please accurately mark “x” in all the boxes that you anticipate being in attendance for. For all the meals/lodging that you will not be there for, please leave the box blank. Bryant University will be using this information to provide the correct number of meals and lodging for each individual and charge the conference. Note that if you sign on the meals and lodge, the conference will be charged by the host university irrespective if you actually use them.
2. The registration fee goes towards paying for the speaker expenses and the facility usages, while the rest is free-will offering. Room and board will be paid to the host university.

Cost per Day	Day 1 (August 14)		Day 2 (August 15)		Day 3 (August 16)	
	Adult	Child (4-12 yrs)	Adult	Child (4-12 yrs)	Adult	Child (4-12 yrs)
Breakfast			\$9.25	\$6.25	\$9.25	\$6.25
Lunch			\$11.85	\$7.90	\$11.85	\$7.90
Dinner	\$15.93	\$10.65	\$15.93	\$10.65		
Lodging	\$29.75	\$15.75	\$29.75	\$15.75		
Subtotal	\$45.68	\$26.40	\$66.78	\$40.55	\$21.10	\$14.15

Total Cost for the Room and Board (per person, excluding registration fee): Adult: \$133.56; Child (4-12 yrs): \$81.10

Please use two checks for the offering: One is designated for room and board, which is not tax deductible. The other one is designated for free offering which is tax deductible and NECCC will issue a receipt.

3. Location: Bryant University, 1150 Douglas Pike, Smithfield, RI 02917-1291
4. Check in will take place on August 14th between 1:00 -2:50 pm at “Hall 16” (See the map, downloadable from the web site). There you will receive your room key and meal bracelet with a \$10 refundable deposit per key. **Please prepare this cash in advance.**
5. You will need to bring your own sheets, pillows, blankets, swimming/sports suits, stationeries, and Bible.
6. For more information, please visit our website at www.neccc.net. Thank you.