



Registration - Youth Conservation Congress 2013
Illinois Beach State Park and Resort, Zion, Illinois
November 23-24, 2013

This form is fillable. It contains Organization, Chaperone, Student and Presentation Information on the last page

Organization Name: _____
Address: _____
City: _____ State: _____ Zipcode: _____

Chaperone 1

Name: _____ Age: _____ Gender: ___m___f
Address: _____
City _____ State: _____ Phone: _____
Email: _____

Chaperone 2

Name: _____ Age: _____ Gender: ___m___f
Address: _____
City _____ State: _____ Phone: _____
Email: _____

Chaperone 3

Name: _____ Age: _____ Gender: ___m___f
Address: _____
City _____ State: _____ Phone: _____
Email: _____

Chaperone 4

Name: _____ Age: _____ Gender: ___m___f
Address: _____
City _____ State: _____ Phone: _____
Email: _____

Student 1:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 2:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 3

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 4:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 5:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 6:

Name: _____
Age: ____ Gender: ____ m ____ f: Emergency Phone # _____
Parental Consent: ____ Y ____ N
Food Allergies: ____ Y ____ N If yes, explain _____

Special Accommodations: ____ Y ____ N If yes, Explain _____

Student 7:

Name: _____
Age: ____ Gender: ____ m ____ f: Emergency Phone # _____
Parental Consent: ____ Y ____ N
Food Allergies: ____ Y ____ N If yes, explain _____

Special Accommodations: ____ Y ____ N If yes, Explain _____

Student 8:

Name: _____
Age: ____ Gender: ____ m ____ f: Emergency Phone # _____
Parental Consent: ____ Y ____ N
Food Allergies: ____ Y ____ N If yes, explain _____

Special Accommodations: ____ Y ____ N If yes, Explain _____

Student 9:

Name: _____
Age: ____ Gender: ____ m ____ f: Emergency Phone # _____
Parental Consent: ____ Y ____ N
Food Allergies: ____ Y ____ N If yes, explain _____

Special Accommodations: ____ Y ____ N If yes, Explain _____

Student 10:

Name: _____
Age: ____ Gender: ____ m ____ f: Emergency Phone # _____
Parental Consent: ____ Y ____ N
Food Allergies: ____ Y ____ N If yes, explain _____

Special Accommodations: ____ Y ____ N If yes, Explain _____

Student 11:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 12:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 13:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 14:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 15:

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone # _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Student 16

Name: _____

Age: ___ Gender: ___ m ___ f: Emergency Phone# _____

Parental Consent: ___ Y ___ N

Food Allergies: ___ Y ___ N If yes, explain _____

Special Accommodations: ___ Y ___ N If yes, Explain _____

Presenter(s):

Presentation Summary: