

# PRIMARY ADULT LEADER/ADULT LEADER WORKSHEET

This worksheet is for congregational information-gathering purposes only. Do Not Mail. The following information will be needed to complete online registration for ALL participants.

Primary Adult Leader     Adult Leader

## New, Substitution, or Cancellation

New     Substitution     Cancellation

If this registration is a substitution please provide the name of participant substituted:

\_\_\_\_\_

*Note: Substitutions cannot be made after May 30, 2022. Substitutions will not be accepted on-site at the Gathering. A \$150.00 charge per person will be retained for cancellations made on or before May 30, 2022. The remaining funds will be refunded to the congregation through the Primary Adult Leader.*

## Indicate

Sex:  F     M    DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Title (circle one): Mr. / Mrs. / Ms. / Rev. / Dr. / Rev. Dr.

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_

Last Name: \_\_\_\_\_

Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

*The Gathering asks that each Adult Leader carry a cell phone at the Gathering and to supply their number to the Gathering Office to contact individual groups in case of a specific emergency. The Gathering will send text messages in emergency situations.*

Day Number: \_\_\_\_\_

Evening Number: \_\_\_\_\_

Emergency Contact (Someone not attending the Gathering):

\_\_\_\_\_

Emergency Contact Relationship: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

If rostered, please list vocation: \_\_\_\_\_

How many LCMS Youth Gatherings have you attended? \_\_\_\_

## T-Shirt Size

The Gathering Office is requesting participant t-shirt size to gauge proper quantities and sizing for servant event t-shirts and other shirts being offered.

Small     Medium     Large     XL  
 2XL     3XL     4XL     5XL

## Ethnicity (Optional)

By law, participants are not required to share their ethnicity. The Gathering respectfully requests an indication of the ethnic-cultural background of a person registering for the Gathering.

Asian     Native Alaskan  
 Black/African American     Native American  
 Hispanic/Latino     Pacific Islander  
 Indian     White/Caucasian  
 Middle Eastern     Multiethnic

## Primary Language

English     Chinese  
 Spanish     French  
 German     Other

If other, please specify. \_\_\_\_\_

What other languages do you speak fluently?

\_\_\_\_\_

I intend to partake in Holy Communion at the Gathering Worship Service

Special Needs  Yes     No

If yes, Special Needs Form must be completed.

## For Primary Adult Leaders Only

Our group plans to travel to the Gathering via:

Plane     Car/Van  
 Train     Private Motor Coach

Name of Pastor who will sign Pastoral Affirmation Form:

\_\_\_\_\_