



EXTRAVAGANZA '11 REGISTRATION

Once registration is received and processed, you will be sent confirmation materials.

Name: _____ Title: _____
 Mailing Address: _____ Church/Organization: _____
 City / State / Zip: _____ Church/Org. Address: _____
 Home Phone: _____ Work Phone: _____ Fax: _____
 Email: _____
 Region: _____ Synod: _____ Years in Ministry: _____ Years in Present Position: _____ LACE Member? Yes No

Intensive Care Courses January 20-21 \$150.00
 1 2 3 4 5 6 7

Extravaganza Registration

- Member Individual Registration 7/1/10 - 10/31/10 \$220.00
- Member Individual Registration 11/1/10 - 12/31/10 \$240.00
- Member Individual Registration after 1/1/11 \$275.00
- Non-Member Individual Registration \$460.00
- Individual Full-Time Student Registration (Member) \$125.00
- Member Retired \$125.00
- Spouse Registration \$75.00
- Extravaganza T-Shirt - Circle One: S M L XL XXL \$15.00
- Tom Hunstad Scholarship Fund Donation \$ _____

Network Membership I Am Paying For Now

- Network Basic Membership Dues - 1 Year \$75.00
- Network Supporting Level Membership Dues - 1 Year \$125.00
- Network Sponsoring Level Membership Dues - 1 Year \$175.00
- Network Full Time Student Membership Dues - 1 Year \$35.00
- Network Retired Membership Dues - 1 Year \$35.00

Total (Intensive Care, Extravaganza, and Membership) \$ _____

Registration can be done in three easy ways:

1. Fill out this Registration Form and mail to:
 ELCA Youth Ministry Network
 524 S. 6th Street
 Moorhead, Minnesota 56560
2. Fax this Registration Form to:
 218-287-8005
 Attn: Laurie Hoiium
3. Log on to www.elcaymnet.org and use your credit card to register online.

Housing Information

We have arranged for **Special Discount Rates** with the Hyatt Crown Center in Kansas City. Book your housing by going to www.elcaymnet.org and from the Extravaganza page, click on "Book Your Housing Now."

Please be sure to stay in the Hyatt with us! You will have a better experience being with the rest of the community and will help the Network make our minimum guarantee for room reservations.

Payment Options

- Check enclosed, payable to the *ELCA Youth Ministry Network*
 Check Number _____ Check Amount _____
- Invoice my church
- Credit Card Visa Mastercard
- Card Number: _____
- Signature Panel CCV Number: _____
- Expiration Date: _____
- Signature: _____
- Name on Card: _____
- Card Billing Address: _____

In an effort to connect you with people working in similar areas, please check all that apply.

- Campus Ministry Outdoor Ministry
- Rural Ministry Church Relations
- Urban Ministry Synod Staff
- Student Christian Educator
- Higher Education Pastor
- Other Ethnic/Multicultural
- Retired

Please tell us your race/ethnicity.

- African American or Black
- American Indian & Alaska Native
- Asian & Pacific Islander Latino/a
- Arab and Middle Eastern Caucasian/White
- Multiethnic/Multiracial