



# SCRC REGISTRATION

**1st Registrant**

Print name as you would like it to appear on your name badge

**SPOUSE**

Print name as you would like it to appear on your name badge

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Regular Talks	✓ CHOOSE EITHER: Regular Talks--OR--Set Free Track↓						Regular Talks	✓ CHOOSE EITHER: Regular Talks--OR--Set Free Track↓					
	Friday Sessions		Saturday Sessions		Sunday Sessions			Friday Sessions		Saturday Sessions		Sunday Sessions	
Enter letter of desired talks	1st Choice	2nd Choice	1st Choice	2nd Choice	1st Choice	2nd Choice	1st Choice	2nd Choice	1st Choice	2nd Choice	1st Choice	2nd Choice	
	1 - _____	1 - _____	4 - _____	4 - _____	8 - _____	8 - _____	1 - _____	1 - _____	4 - _____	4 - _____	8 - _____	8 - _____	
	2 - _____	2 - _____	5 - _____	5 - _____	9 - _____	9 - _____	2 - _____	2 - _____	5 - _____	5 - _____	9 - _____	9 - _____	
	3 - _____	3 - _____	6 - _____	6 - _____	10 - _____	10 - _____	3 - _____	3 - _____	6 - _____	6 - _____	10 - _____	10 - _____	
			7 - _____	7 - _____					7 - _____	7 - _____			

Address \_\_\_\_\_ Apt# \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Phone Hm ( ) \_\_\_\_\_ Wk ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_ Email \_\_\_\_\_

New Address? *If YES, please list former zip code*

Free Newsletter Email Signup! I would like to receive the SCRC SPIRIT Newsletter: by Email  (Provide Email above)

## CHILDREN • TEENS ~ Ages 5-17 MUST Register

First Name	Last Name	Age	Grade	Program Code	Enter Code

**Program Codes:** TC.....Teen Conference (grades 6\*-12) \*Parents may enroll 6th Graders in either CP or TC.  
 CP.....Children's Program (grades K-5)

**Responsibility/Medical Agreement** Parent/Adult Chaperone assumes full responsibility of their child/teen when child/teen programs are not in session. If a medical emergency should arise while a child/teen is participating in the program, the on-duty Convention Center nurse will be available to determine appropriate medical care for the child/teen. Any costs incurred in obtaining said medical care shall be the sole responsibility of the parent/legal guardian. If a child/teen does not attend the entire child/teen program, SCRC assumes no responsibility for their safety, actions or whereabouts.

**Please sign** **Cell Phone Contact# for Parent/Legal Guardian** ( ) \_\_\_\_\_

**Parents** \_\_\_\_\_ **Required parent/legal guardian signature** \_\_\_\_\_ **date** \_\_\_\_\_

## ARENA FLOOR LEVEL SEATING (Self Seating)

During Liturgies "Floor Level Seating in Arena" is set aside for the following special needs. Check as applies:  Seniors  Walking/Stair Difficulty  Wheelchair  Blind  Deaf (ASL)  Hard of Hearing  Caretaker  Family w/stroller

Name(s) of those with special needs \_\_\_\_\_ Caretaker's Name (Must register for Convention): \_\_\_\_\_

## PAYMENT

**Check or Money Order:** Payable to SCRC. Mail with registration form to: SCRC Convention • 9795 Cabrini Drive • Ste. 208 • Burbank, CA 91504

**Credit Card:** Mail or FAX to (818) 771-1379.  Visa  MasterCard  AmericanExpress  Discover

Credit Card # \_\_\_\_\_

Credit Card Signature \_\_\_\_\_ Expiration Date \_\_\_\_\_



**REFUND POLICY**

Refund requests must be in writing. Unused tickets must be mailed with requests. Requests must be postmarked by 8/12/13. \$20 processing fee per form.

## VOLUNTEER SERVANTS OF CHRIST

☺ **Assistance is needed in the following areas** ☯

- Usher at Mass • Registration • Badge Checker • Bookstore cashier/bagger
- Eucharistic Minister \*(send copy of certification)

**\*NOTE to EMS:** Since we never know how many Priests & Deacons will be at each Mass, EMS serve on an "as needed basis". Please go to Sacristy 1/2 hour before Mass to offer assistance as needed. Thank You!

**Discounts or fee waivers are no longer available for the above areas of service.**

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

Position: \_\_\_\_\_

**Orientation Day is August 3 Notices will be sent.**

Questions? scrcvents@scrc.org or (818) 771-1361, ext. 301

## REGISTRATION FEES Thru August 12 AFTER AUGUST 12

Regular Weekend (2 or 3 days) - Talks A-D only	@ \$82 per adult	\$ _____	@ \$92 per adult	\$ _____
Regular One Day ONLY - Talks A-D only	@ \$56 per adult	\$ _____	@ \$66 per adult	\$ _____
SET FREE Track (2 or 3 Days) (Set Free Guidelines read)	@ \$105 per adult	\$ _____	@ \$115 per adult	\$ _____
SET FREE Track One Day ONLY (Set Free Guidelines read)	@ \$70 per adult	\$ _____	@ \$80 per adult	\$ _____
Teen Conference (2 or 3 days)	@ \$54 per teen/chaperone	\$ _____	@ \$64 per teen/chaperone	\$ _____
Teen Conference (Sat. ONLY)	@ \$40 per teen/chaperone	\$ _____	@ \$40 per teen/chaperone	\$ _____
Children's Program (Grades K thru 5, Sat. & Sun.ONLY)	@ \$43 per child	\$ _____	@ \$53 per child	\$ _____
Vietnamese Talks (Sat. ONLY)	@ \$20 per adult	\$ _____	@ \$20 per adult	\$ _____
Vietnamese:Full Weekend (Sat. Vietnamese Talks + Fri. & Sun Talks A-D)	@ \$82 per adult	\$ _____	@ \$92 per adult	\$ _____
PLEASE SEND ME:				
# _____ Registration Brochure(s)				
# _____ Teen Flyer(s)				
# _____ John Michael Talbot Concert Flyer(s)				
# _____ Advertisement Flyer(s) for Parishes				
Donation to support the SCRC Ministry	\$ _____		Donation to support the SCRC Ministry	\$ _____
<b>TOTAL (thru August 12):</b>	\$ _____		<b>(after August 12):</b>	\$ _____