



CANADA DISTRICT COUNCIL

Pentecostal Assemblies of the World

YOUTH REGISTRATION (Age 16 & Under)

Name: _____
Last First Age Male/Female

Name: _____
Last First Age Male/Female

Name: _____
Last First Age Male/Female

Address: _____
No. Street City Province/State Postal Code

Telephone: () _____
Home No.

Parent/Guardian: _____

Church Attending: _____ Pastor: _____

Date Completed: _____

Children's Program

1st Child \$3.00 _____

2nd Child \$2.00 _____

3rd Child \$1.00 _____

All Other Auxiliaries (This Session) FREE

Method of Payment: Cash Debit Check # _____

Total Paid \$ _____