



# Church of the Brethren 2019 Workcamps Registration

Please specify the participant's role \*

Advisor

Workcamp Choice \*

(Choose One)

## Participant Information

Name \*

First Name

M.I.

Last Name

Gender \*

- Female  
 Male

Select a Choice \*

- Hispanic or Latino  
 White (Not Hispanic or Latino)  
 Black or African American (Not Hispanic or Latino)  
 Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)  
 Asian (Not Hispanic or Latino)  
 American Indian or Alaska Native (Not Hispanic or Latino)  
 Two or More Races (Not Hispanic or Latino)  
 I choose not to respond

Date of Birth \*

Month

Day

Year

Email \*

Email Address

Confirm Email \*

Confirm Email Address

All communication from the Workcamp office will be sent to the e-mail address provided above. If there is a reason you cannot receive communication via e-mail, opt out to receive paper correspondence at the mailing address provided below.

Opt out of electronic communication

Address \*

Street Address

City, State, and Zip \*

City

State

Zip/Postal Code

Evening Phone \*

(###) ###-####

Day Phone

(###) ###-####

Cell Phone While Traveling

(###) ###-####

Advisors, please list all youth you will be advising (separate names by commas, please) \*

[Find your home congregation code here](#)

Church Code \*

T-shirt Size (Adult Sizes) \*

Is this your first Workcamp? \*

- Yes
- No

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SAVE PARTICIPANT



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