

XTREME WINTER

The Ultimate Winter Student Experience!

2024

STEP 1

PLEASE SIGN, DATE AND RETURN WITH REGISTRATION FORMS AND DEPOSIT. YOUR REGISTRATION CANNOT BE PROCESSED WITHOUT THIS FORM.

BY SIGNING THIS FORM YOU AGREE TO THE FOLLOWING:

As a group leader attending Xtreme Winter 2024 conferences, I understand that the actions of the individuals in my group will be the responsibility of myself and my designated chaperones. I further understand that Xtreme conference is in place to entertain and minister, and cannot be held responsible for actions of my group. I realize that any damage done by my group to our hotel or any Xtreme property will be my responsibility and will be taken care of before my departure from the conference. I have also read and understand the Cancellation Policy, Housing Policy and Financial Info and agree to abide by them.

MAIL OR FAX TO:



xtreme conferences
P.O. Box 2034
Woodstock, GA 30188
Phone: 1.888.987.3636
Fax: 770.592.8239

GENERAL INFO

CHURCH NAME

GROUP LEADER

ADDRESS

ADDRESS

PHONE NUMBER

ALTERNATE PHONE NUMBER

EMAIL ADDRESS

CONFERENCE

PLEASE SELECT A CONFERENCE:

- BRANSON
DEC.27 - DEC.29
- GATLINBURG 01
DEC.27 - DEC.29
- GATLINBURG 02
DEC.29 - DEC.31

OUR ESTIMATED TOTAL NUMBER OF ATTENDEES

= \$200

BILLING INFO

- Enclosed is a check for our \$200 deposit
- Bill my credit card for our \$200 deposit (a 3.9% convenience charge will apply):

Card No: _____ Expires: _____

AUTHORIZATION

GROUP LEADER NAME (SIGNATURE)

DATE SIGNED

GROUP LEADER NAME (PLEASE PRINT)

f XTREMECONFERENCES
@ XTREME_CONFERENCES
XTREME_CONF

XTREMECONFERENCES.COM
888-987-3636

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12/27 12/27 12/29