

DYNA Summer Chill Registration (PLEASE PRINT or TYPE CLEARLY AND NEATLY)

DYNA Member Name: _____

Forum Name: _____ Age at the time of Summer Chill: _____ DOB: _____

DYNA Member Email: _____

DYNA Member Cell Phone Number: _____ Home State: _____

(For Emergency Use)

Primary/Attending Parent/Guardian Name: _____ (Relationship) _____

Phone Number(s): H: _____ W: _____ C: _____

Primary/ Attending Parent/Guardian Email: _____

(For Emergency Use)

Other Parent/Guardian Name (2) _____ (Relationship) _____

Other Parent/Guardian Phone Number(s): H: _____ W: _____ C: _____

Other Parent/Guardian Email: _____

Number attending: _____ parent(s) _____ siblings for a **TOTAL NUMBER FROM FAMILY:** _____

Names of Parent/Guardian(s) Attending (for name tags): _____

Names and Ages of siblings attending (for name tags) _____

NOTES:

_____ I have called the hotel and made my hotel reservations. I reserved _____ # of rooms under the name of: _____. I will arrive on _____ date and check out on _____ date. I have _____ # of people staying in my room.

_____ Enclosed is my non-refundable Registration Fee of \$50.00 per person attending. Check payable to: DYNA. We respectfully request that you consider making a tax deductible donation during the event since we make every effort to keep your registration fee so low. Please help DYNA continue to make this event and our services possible.

_____ Enclosed is my Event Authorization Forms, my Medical Information Form and this Registration form (3 forms).

_____ DYNA Youth Member Preferred T-Shirt Size (adult size only available - S, M, L, XL, XXL)

* Please consider reserving your room early and sending in your registration forms in ASAP.

*Established Reservation Deadlines are final.

*Goofy Slippers required for lecture (youth only).

*It is your responsibility to keep up to date on this event – check the forum and your emails regularly.

MAIL THIS FORM AND ALL OTHER REQUIRED DOCUMENTATION TO:

DYNA, Inc. 1301 Greengate Court, Waldorf, MD 20601