

NC / BERMUDA CONVENTION ALATEEN REGISTRATION FORM

(Must be completed by EVERY Alateen attending Convention.)

SECTION A: ALATEEN INFORMATION

Name: First _____ Last _____
Age _____ Sex _____ Name on badge _____
Home Address _____
City _____ State / Province _____ Zip _____
Phone numbers (Home) _____ (Cell) _____

SECTION B: ALATEEN GROUP INFORMATION

Alateen Group Name _____
City _____ State / Province _____

SECTION C: TRANSPORTATION: (Person transporting you to and from Convention)

Name: First _____ Last _____
Phone numbers (Home) _____ (Cell) _____
Driver's relationship to you (Check all that apply): Parent / Guardian _____ AMIAS _____ Self _____

SECTION D: FOR PARENT/GUARDIAN (If transporting Alateen to Convention):

Check one:

I am staying for the entire Convention and my child will be under my care at all times.

I am leaving my child in the care of (AMIAS Name) _____ for all/part of the Convention. If registering your child on site please be sure to complete the "NORTH CAROLINA ALATEEN MEDICAL INFORMATION AND TRAVEL AUTHORIZATION FORM" and leave at the Alateen registration desk.

SECTION E: ABOUT YOUR ALATEEN SPONSOR OR ASSISTING AMIAS

Your certified AMIAS / Sponsor for the weekend must be same sex as you. If you cannot arrange for a Sponsor / AMIAS of the same gender, please contact the Area Alateen Coordinator at areaalateen@gmail.com so that one can be assigned to sponsor you for the Convention.

AMIAS Name: First _____ Last _____
Phone numbers (Home) _____ (Cell) _____

SECTION F: OTHER IMPORTANT STUFF

For Alateen:

I have read the NC/Bermuda Al-Anon/Alateen Safety and Behavioral Policies and agree to abide by them during this event. Initial here _____

Will you be attending the Alateen Pizza Party on Saturday night? Yes _____ No _____

For Parent / Guardian:

I authorize my child to attend the NC / Bermuda Al-Anon / Alateen Convention being held Feb. 17th - Feb. 19th, 2017.

Parent / Legal Guardian (print): First _____ Last _____

Parent / Legal Guardian (sign): _____ Date _____

REMINDER: Please Mail a Copy of Your NC or Bermuda Medical and Travel Authorization Form

Make Check Payable to: NC / Bermuda AFG Convention
Mail Registration form, payment and the Medical/Travel form to: 2529 McArthur Landing Circle, #201,
Fayetteville, NC 28311

Early Bird Cut-off: February 10, 2017

Early bird Registration Fee:	Alateen \$5.00	Onsite Registration Fee:	Alateen \$10.00
	AMIAS: \$25.00		AMIAS: \$35.00