



2016 Unity Conference

Print and complete this page and mail to:

Yahweh's Restoration Ministry, PO Box 463, Holts Summit, MO 65043

Name* (first, middle, last): _____ Date of Birth**: _____

Address: _____

City/State/Zip: _____

Phone: _____ E-mail: _____

Others in your group:

Name* (first, middle, last): _____ Age: _____ DOB** _____

Name* (first, middle, last): _____ Age: _____ DOB** _____

Name* (first, middle, last): _____ Age: _____ DOB** _____

Name* (first, middle, last): _____ Age: _____ DOB** _____

Name* (first, middle, last): _____ Age: _____ DOB** _____

Name* (first, middle, last): _____ Age: _____ DOB** _____

* Those aged 18 and older must include name as it appears on driver license or other government issued ID.

** Required for all attendees 18 years and older (not required for minors).

Lodging Options:

✓ Option	Lodging Type:
<input type="checkbox"/>	YRM Tent Site (contact Ministry to confirm availability)
<input type="checkbox"/>	YRM RV Site (contact Ministry to confirm availability)
<input type="checkbox"/>	Other (please specify location):

✓ Please check to indicate agreement:

☐ I am not a convicted sex offender.

☐ I will not hold YRM liable for any accidental injuries occurring on YRM's grounds or property.