NCHEA 2023 Kids Conference Registration Form

March 10 and 11, 2023, Capitol City Christian Church, 7800 Holdrege St., Lincoln, Nebraska Send in this form or register online BEFORE FEBRUARY6 at www.NCHEA.org

Parents/Guardians must:

- 1) Pre-register and attend the 2023 NCHEA Adult Conference.
- 2) Pre-register/pre-pay for each child by mailing the registration below OR register online at www.nchea.org. No registration is permitted on site of the NCHEA Kids Conference!
- 3) Submit a signed hard copy of the <u>Medical Permission/Release</u> form and <u>Release and Indemnification Agreement</u> form (Forms*) prior to registration deadline or completing a combined form online at: https://tinyurl.com/ttbzfe43 prior to registration deadline. (*Forms can be found on NCHEA.org)
- 4) Provide a sack lunch and two (2) snacks each day for each child (ages 5 12) registered. No refrigeration available.
- 5) PLEASE NOTE: these two guidelines from the church facility:
 - A) No "red" drinks allowed (or any deep color that would stain carpet if spilled).
 - B) No shoes that will scuff or leave marks on the gym floor.

Schedule

Friday 8:00 a.m 8:30 a.m Check-in 4:30 p.m 5:00 p.m Dismissal			8:00	<u>Saturday</u> 8:00 a.m. – 8:30 a.m. – Check-in 4:30 p.m. – 5:00 p.m. – Dismissal				
Parents are welcome to ch from the care of the Kids of daytime NCHEA Confere	Conference	staff. Plea	se remember -	childre	n may NOT	accompany p	arents retu	
REGISTRATION (Postal If the parents are NCHE). If the parents are not NC *Parents must join or real	<mark>4 <i>Members</i> CHEA Mem</mark>	*: <i>\$40 for</i> abers: \$45	<i>the first child</i> for the first	and \$30 child an	<i><mark>) for each a</mark></i> d \$35 for e	dditional sibli ach additiona	ıl sibling.	
Child	Age	M/F	\$		Child	Aσe	M/F	\$
1.		111/1	<u>\$</u>	4.			111/1	\$
2.			\$	5.			-	\$
3.			<u> </u>	6.				\$
							Total	\$
Kids Conference T-Shirt	s – Child si	zes- S. M	. L. XL					
Kid Conference T-	Size		Quantity		\$10 each (incl sales tax)		Total Due	
Shirts / Child Sizes –					`	,		
S, M, L, XL								
Parent(s) Name(s), phon Husband (first) Wife (first)	e, and U.S.	mail and	email addres	ses: (last) (last)				
Address:	(State:			_	Zip
Phone:			Email:					

Mail this Registration Form, the Medical Permission and Indemnification Forms (postmarked by February 6) and your check made payable to NCHEA to: Tina Gould, Registration Coordinator, 1655 Harwood St., Lincoln, NE 68502 Please direct your questions to: Tina Gould, Registration Coordinator at (402) 438-3466 or kidsconfregist@nchea.org

Refund Policy: No refunds after March 1, 2023. All refund requests must be made in writing. All refunds are subject to a \$5 cancellation fee. Send a self-addressed stamped envelope to: Nick Lenzen, 2610 Winchester South, Lincoln, NE 68512 when requesting a refund.