



GROUP REGISTRATION FORM -  
D6440 YOUTH ASSEMBLY

To ensure a great event, we don't need to know WHO is coming (although we'd like to), but we need to know HOW MANY to expect

CONTACT	
Name	
Address	
Address 2	
City, St, Zip	
Phone	
Email	

REGISTRATION	Quantity:
This registration is for (choose all that apply):	
Members of the _____ Interact Club	
Interact Club Advisors	
Rotarians from the _____ Club	
Other students	
Other adults	
Total	

PAYMENT	
Registration is \$20 per participant	
Check Enclosed? Amount and Check #	
<b>OR BRING A CHECK TO THE ASSEMBLY!</b>	

Email the form to [D6440YouthServices@gmail.com](mailto:D6440YouthServices@gmail.com) AND to [gov.lyle@rotary6440.org](mailto:gov.lyle@rotary6440.org)

If paying by check, mail the completed form and a check for \$20 per attendee to:  
D6440 Youth Assembly  
c/o Lyle Staab  
24 Championship Pkwy  
Hawthorn Woods, IL 60047

If you know the names of the attendees, FOR THOSE OVER 13 YEARS OLD ONLY, could you please share that information?

For Attendees over 13 years old ONLY				
First Name	Last Name	Attendee Type	Email	Phone

