

# 2019 PREREGISTRATION GOOD UNTIL >>APRIL 3<<

PRINT clearly and mail with payment postmarked by April 3<sup>rd</sup> to:  
MassHOPE Convention Registration, 46 South Road, Holden, MA 01520

PLEASE NOTE: Online registration at [www.masshope.org](http://www.masshope.org) required for payment by credit card.

After April 2 an onsite registration form will be available at [www.masshope.org](http://www.masshope.org). **(PRICE IS \$10 MORE AT THE DOOR!)**

Last name: \_\_\_\_\_  Check here if you're **NOT** on our mailing list, but want to be.

First Name: \_\_\_\_\_ Spouse (only if attending): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

**VOLUNTEER** - Yes, I am willing to offer some of my time to volunteer at the convention. Please contact me.

## ADDITIONAL NAMES BEING REGISTERED:

**Full** name(s) of children (24 mos - 18 yrs) and young adults (18+ yrs) and age(s):

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_

**Non-homeschooling grandparent / adult caregiver** for your children while at convention - FREE, **with an accompanying paid** adult registration. Please include first & last name(s) here:

Full Name \_\_\_\_\_ Full Name \_\_\_\_\_

If you have more child, grandparent, or caregiver entries, check here  and list names and ages (of children) on a separate sheet.

## PREREGISTRATION FEES: (MUST be postmarked by April 3, 2019 in order for these fees to apply.)

**Couple (Husband & Wife):** Two days \$60.00 = \$ \_\_\_\_\_

One day - Check one:  Fri  Sat \$50.00 = \$ \_\_\_\_\_

**Individual Adult:** Two days \$55.00 = \$ \_\_\_\_\_

One day - Check one:  Fri  Sat \$45.00 = \$ \_\_\_\_\_

**First Time Attendees (good for both days):** Husband & Wife \$50.00 = \$ \_\_\_\_\_

Available with pre-registration ONLY! Individual \$45.00 = \$ \_\_\_\_\_

**Children ages 12-18 (with accompanying paid adult):** \_\_\_\_\_ x \$10.00 = \$ \_\_\_\_\_

**Children's Program (ages 5-11, price includes 1<sup>st</sup> floor access):**

➤ **MUST** include separate release form for children to participate (See next page).

One day - Check one:  Fri  Sat \_\_\_\_\_ x \$20 = \$ \_\_\_\_\_

Two days \_\_\_\_\_ x \$30 = \$ \_\_\_\_\_

**Children 1<sup>st</sup> Floor access only wristband (ages 5-11, max \$15/fam):** \_\_\_\_\_ x \$5 = \$ \_\_\_\_\_

**Children (24 months - 4 years) attending workshops with parents:** \_\_\_\_\_ x \$5 = \$ \_\_\_\_\_

(Children under 24 months are free and will get neither wristband nor name badge.)

Yes, I would like to donate to the MassHOPE scholarship fund. = \$ \_\_\_\_\_

**TOTAL AMOUNT DUE \$ \_\_\_\_\_**

## PAYMENT METHODS ACCEPTED:

CHECK or MONEY ORDER, payable to MassHOPE, mailed with completed registration form and children's program release form, if applicable. If you wish to pay by credit card, please register online at [www.masshope.org](http://www.masshope.org).

**For Registration Coordinator Only:**

Date received: \_\_\_\_\_ Check/MO #: \_\_\_\_\_ Check amount: \_\_\_\_\_

Notes: \_\_\_\_\_

**CHILDREN'S PROGRAM** (Ages 5-11 only)

MassHOPE will again be providing families with a quality children's program - this year with Walk Thru the Bible!  
An interactive program that will have your kids excited about the Bible!

Walk through the Old Testament on Friday.  
Walk through the New Testament on Saturday.  
Experience the Bible Like Never Before!

It's interactive, memorable, relevant, exciting, and fun! Using the exclusive Walk Thru the Bible hand signs memory system, a Walk Thru the Bible instructor will guide your kids through the Old and New Testaments in a way they've never experienced!

Have a willing volunteer for this program? Please email [convention@masshope.org](mailto:convention@masshope.org) for free volunteer admission information.

**SPACE IS LIMITED – DON'T DELAY!**



Children may register to participate in this program by parents:  
a) indicating such on the pre-registration form on previous page, AND  
b) completing and submitting the release form below.

**IMPORTANT NOTE:** In order to provide a quality program for the children, there is **LIMITED SPACE - FIRST COME, FIRST SERVED.** Once the cut-off number is reached, no other registrations will be accepted! We apologize for any inconvenience.

**Pre-registration is required. Onsite registration is NOT available.**

**2019 CHILDREN'S PROGRAM RELEASE FORM**

\*\*\*\*\* REMINDER: There is limited space for this program and you must register your children early! \*\*\*\*\*

Please clearly print and mail with payment and completed registration form (see reverse).

Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Child's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_

Does anyone listed above have any medical conditions or behavioral issues of which we should be aware?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*MEDICAL RELEASE: I understand and hereby agree to assume all of the risks, which may be encountered by my children in the children's program, including activities preliminary and subsequent thereto. I do hereby agree to hold Walk Thru the Bible, its employees and volunteers, AND host or hiring organizations and/or facilities harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.*

*In the event that my child becomes injured or ill during any game or activity, I authorize Walk Thru the Bible or their representative to secure first aid and/or the services of a physician or hospital and agree to assume all financial obligations incurred therewith.*

*I understand that Walk and/or MassHOPE may, for promotional purposes, take photographs in which my child's likeness may appear. I authorize Walk Thru the Bible and MassHOPE to use those photographs for promotional materials, including (but not limited to) the Walk Thru the Bible and/or MassHOPE websites.*

Parent's Name: \_\_\_\_\_

Emergency Cell/Pager/Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (while at convention)

Parent/Guardian Signature: \_\_\_\_\_