

**Lutheran Youth Fellowship
ASSEMBLY**

Pinebrook Bible Conference and
Retreat Center
East Stroudsburg, PA
November 13-15, 2009



Please print clearly:

NAME _____ Male Female

ADDRESS _____

PHONE _____

E-MAIL _____ GRADE _____

CONGREGATION _____ LOCATION _____

PASTOR _____ MISSION DISTRICT _____

PASTOR'S SIGNATURE _____

I am registering as a _____DELEGATE _____ADVISOR _____VISITOR

Please check this space if you are interested in receiving nomination materials for the LYF offices of president, vice-president, secretary, and treasurer.

*Completed registration form, medical form (on reverse side) and \$120 per participant are due **by October 15, 2009**. Registrations postmarked after October 15 will be accepted on a space available basis at \$145 per person. Groups of 3 or more must be accompanied by an adult. Send registrations to:*

Lutheran Youth Fellowship Assembly
Northeastern Pennsylvania Synod, ELCA
4865 Hamilton Boulevard, Wescosville PA 18106

Make checks payable to:
Northeastern Pennsylvania Synod (or NEPS): LYF Assembly

Please make copies of this form and **medical form as needed.**

(for office use only)

Date received

Medical form

Amount paid

Check #

Recorded by