

REGISTRATION WORKSHEET

Fall Ambassador & Teen Leader Training

October 18-20, 2019 / Holiday Inn Bozeman, MT

After completing this worksheet please return it to your county office to complete your registration. If you have any questions about the registration process, please contact your county office. Registration Fee is \$162

Counties please be sure the information in 4honline is up to date for the CURRENT (2019-2020) 4-H Year by the date of this event, including media authorization and code of conduct.

Name: _____ County: _____

Cell Phone: _____ Email: _____

YOUTH

Chaperone Name: _____ County: _____

Each youth must have an adult chaperone that is responsible for them.

Please indicate one person you would like to room with, if possible: _____

All youth participants will share a room with 3 other youth, unless other accommodations are necessary and made through the 4-H Center. Youth are not permitted to share rooms with adult participants.

ADULTS

Adult participants will be four to a room unless otherwise indicated below. There is an extra charge of \$55 per person to stay two to a room. *Please select one of the following ADULT lodging options.*

- Would you like to share a room with 3 other people? Registration Fee of \$162 (\$100 + \$62 Lodging)
- Would you like to share a room with just one other person? \$223 (\$100 + \$123 Lodging)
- Would you like a single room? \$346 (\$100 + \$246 Lodging)
- Would you like to make your own lodging arrangements? (No Lodging Fee) \$100 Registration Fee

Do you have a roommate preference? _____

T-SHIRT Order: \$12.00 Each

Short Sleeve 100% cotton with a unique logo designed for the Ambassador Year Please select your preferred size.

- Small
- Medium
- Large
- X-Large
- 2X-Large (\$14)
- 3X-Large (\$14)

ADDITIONAL INFORMATION

Do you need to request any disability accommodations or request other needs? *Please Contact Montana 4-H Center for accommodations prior to the event. 406-994-3501*

- Vegetarian
- Gluten Free: Please describe needs: _____
- Other Food Allergies: _____