

MCCA YOUTH ENCuentRO REGISTRATION FORM

(TO BE COMPLETED IN CAPITAL LETTERS)

REGISTRATION CATEGORY

Participant

District: _____

Chaperone

Circuit: _____

Minister

Congregation: _____

NAME _____

Surname

First name

Middle Initial

DATE OF BIRTH _____ AGE _____ GENDER _____

Day Month Year

ADDRESS

Street _____

City/Town _____

Parish/County/District _____ Country _____

Telephone _____ Fax _____

E-mail _____

OCCUPATION _____

NATIONALITY _____ CITIZENSHIP _____

Passport # _____ Date of Issue _____

Place of Issue _____ Expiry date _____

Emergency Contact Person _____ Relationship _____

Telephone _____

Home

Work

Cell

Email address: _____

TRAVEL/MEDICAL INSURANCE

Provider _____

Policy Number _____ Type/Level of Coverage _____

REGISTRATION FEES

Total registration Fees: **US \$1150** per delegate

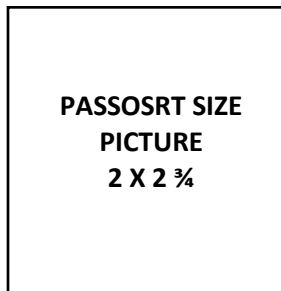
Fees can be paid in three (3) instalments:

<u>Amount</u>	<u>Due Date</u>
US \$150.00	16th June 2023 (Non- Refundable)
US \$500.00	16th October 2023
US \$500.00	16th February 2024

Final deadline for registration is February 16 2024

Polo Size: Sm Med L XL XXL XXXL

Picture:



Banking Information

OVERSEAS WIRES:

Bank of America – New York Branch

New York, NY

ABA#026009593

A/C#6550619464

For Credit to Commonwealth Bank Ltd

For Further Credit to The Methodist Church Bahamas Turks & Caicos Islands Conference and Acct#2001939

Local Third-Party Transfer (Within The Bahamas):

Commonwealth Bank Ltd

East Bay St.

Nassau, Bahamas

Transit No: 21102

The Methodist Church Bahamas Turks & Caicos Islands Conference

Acct#2001939