



Iowa-Missouri Conference Adventurer Registration



We need this form for the Insurance Report

Church _____

Leaders Name _____ **Co-Leaders Name** _____
Address _____ Address _____

Day Phone _____ Day Phone _____
Evening Phone _____ Evening Phone _____
Cell Phone _____ Cell Phone _____
E-mail _____ E-mail _____

Other Assistants (Complete Address and E-mail Please)

Name _____ Name _____
Address _____ Address _____

Day Phone _____ Day Phone _____
Evening Phone _____ Evening Phone _____
Cell Phone _____ Cell Phone _____
E-mail _____ E-mail _____

Adventurers Name Age Adventurer Level Working on this year

Return to: IA-MO Conference, Youth Dept., PO Box 65665, West Des Moines, IA 50265
Fax: 515-223-5692 Email: impfindr@imsda.org