

NCCF 2024 Annual Gathering

”ROOTED IN COMMUNITY”

September 7, 2024 | 8:30am-3:00pm
Quaker Lake Camp | Climax, NC

Registration Form

A suggested donation of \$15 per adult age 18+ is requested to defer costs; donations may be mailed or brought to the registration table when you arrive. Scholarships are available, and donations to help with scholarships may also be offered at the registration table. Make checks payable to NCCF.

Primary Contact: _____

Address: _____

Cell: _____ Landline: _____

Email: _____

Meeting Name and/or Organization: _____

Please list the name of each attendee as you wish it to appear on your name tag; please include age(s) of children:

_____	_____
_____	_____
_____	_____

Total Number of Attendees: _____

Food allergies? _____

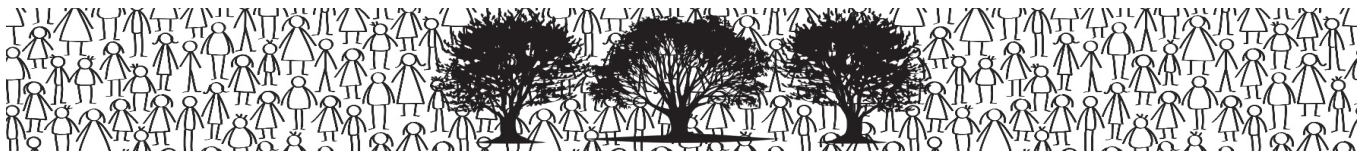
Emergency Contact Information

Name: _____ Phone: _____

Mobility assistance needed? YES NO

Staying overnight? YES NO Which night(s)? Friday Saturday

How many adults? _____ How many children? _____



Photographic Release

During our Gathering, photographs will be taken to document the event, which may be used publicly, including on social media. Please mark one of the following.

YES, I (and any children I am the legal guardian of) AGREE to be photographed and for those photos to be used by NCFE for promotional/marketing purposes.

NO, I (and any children I am the legal guardian of) DO NOT agree to be photographed or for any photos to be used by NCFE for promotional/marketing purposes.

YES, I (and any children I am the legal guardian of) AGREE to be photographed under the following conditions:

Signature: _____ Date: _____

Box Lunch by Jason’s Deli – includes chips, a pickle, and a chocolate chip cookie.

Please make selections for each family member:

Name:		
<input type="checkbox"/> Turkey Breast	<input type="checkbox"/> Grain Bun	
<input type="checkbox"/> Ham	<input type="checkbox"/> Wheat Wrap	
	<input type="checkbox"/> Gluten Free	

Name:		
<input type="checkbox"/> Turkey Breast	<input type="checkbox"/> Grain Bun	
<input type="checkbox"/> Ham	<input type="checkbox"/> Wheat Wrap	
	<input type="checkbox"/> Gluten Free	

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	<input type="checkbox"/> Gluten Free	

Name:		
<input type="checkbox"/> Turkey Breast	<input type="checkbox"/> Grain Bun	
<input type="checkbox"/> Ham	<input type="checkbox"/> Wheat Wrap	
	<input type="checkbox"/> Gluten Free	

Name:		
<input type="checkbox"/> Vegetarian: Spinach Veggie Wrap		
<input type="checkbox"/> Vegan: Spinach Veggie Wrap		
	<input type="checkbox"/> Gluten Free	

Name:		
<input type="checkbox"/> Vegetarian: Spinach Veggie Wrap		
<input type="checkbox"/> Vegan: Spinach Veggie Wrap		
	<input type="checkbox"/> Gluten Free	

Name:		
<input type="checkbox"/> Vegetarian: Spinach Veggie Wrap		
<input type="checkbox"/> Vegan: Spinach Veggie Wrap		
	<input type="checkbox"/> Gluten Free	

We are asking all attendees with last names beginning A-M to bring a sweet snack and attendees with last names beginning N-Z to bring a salty snack to share during the conference/lunch. Breakfast pastries, coffee, and juice will be provided.

Mail Completed Registration Form to: NCFE, c/o Alicia Sharp, 908 Scottish Rite Dr, Apt 219, Greensboro, NC 27407; or **Email** to: alicia_sharp@icloud.com.

REGISTRATION DUE DATE: August 23, 2024.