HOLY TRINITY MONASTERY SUMMER YOUTH PROGRAM REGISTRATION FORM

Instructions:

Dear applicant:

- 1. Please complete the following forms:
 - a. This *Registration Form*
 - b. Code of Conduct
 - c. Required Health Form with attached copy of your health insurance card (front and back)
- 2. Provide your spiritual father or parish priest with a copy of the *Instructions for Required Recommendation*, have him write a letter of recommendation and mail it directly to Holy Trinity Monastery.
- 3. Include two checks:
 - a. \$250 program fee
 - b. \$150 refundable security deposit that will be refunded at the completion of the program if no damages have been incurred.

(Make checks payable to: Holy Trinity Monastery)

- 4. If you are a minor, your parent or guardian must:
 - a. Complete a Required Hold Harmless Agreement and Medical Release form
 - b. Sign the Code of Conduct and the Required Health Form
- 5. Mail all the completed forms and the two checks to:

Holy Trinity Monastery Summer Youth Program

Attn: Rev. Deacon Ephraim Willmarth, Program Coordinator

PO Box 36

Jordanville, NY 13361

- 6. Once all forms and payment are received a confirmation and further instructions will be sent to the email address specified on the registration form.
- 7. If you have questions please contact Fr. Ephraim, our Program Coordinator, at:

Email: ejwillmarth@hts.edu Phone: (315) 858-0945

Personal Information:

NT----

Name:		
first	middle	last
Mailing address:		

Phone: (Home):	(Cell):				
Email address:		Date of bir	th:/	mm	/	
Parish:						
Name of parish priest:	first			last		
Phone:		Email:_				