



ALABAMA FUNERAL DIRECTORS &
MORTICIANS ASSOCIATION, INC.
80th Annual Convention

YOUTH PRE-REGISTRATION FORM

Registration Deadline June 1, 2017
Pre-registration \$75.00 On-site \$100.00

NAME: _____

YOUTH SHIRT SIZE ___ S ___ M ___ L ___ XL

AGE _____ DATE OF BIRTH _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

PARENT/GUARDIAN: _____

OFFICE PHONE _____ CELL NUMBER _____

EMAIL ADDRESS _____

MEAL/DIET RESTRICTIONS _____

MEDICAL INFORMATION
ALLERGIES _____

MEDICINE(S) THAT MUST ACCOMPANY THE CHILD _____

PHYSICIAN'S NAME AND CONTACT NUMBER _____

EMERGENCY CONTACT #1 NAME: _____

CELL NUMBER _____ PHONE NUMBER _____

EMERGENCY CONTACT #2 NAME: _____

CELL NUMBER _____ PHONE NUMBER _____

NOTE: Any adult accompanying a child will have to pay for admission and food separately
PARENT/GUARDIAN SIGNATURE _____ DATE _____
Signature of parent/guardian on this form acknowledges their financial responsibility for medical and dental care when required for their child.