WYD: Lisbon - REGISTRATION Lisbon, Portugal July 28 - August 7, 2023

Please complete submit all forms and deposit of \$350 ASAP

Group/Parish/School Name:		
Group Leader's Name:		
Participant Name:		
Address:		_
City:	State:	Zip:
	Evening phone:	
Cell phone of participant:		
Gender: □ Male □ Fe		
If you are under 19, what is your age		
T-shirt Size : \square Small \square Medium	n 🗆 Large 🗆	∣ XLarge □ XXLarge
Are you a group leader or chaper	one? Yes	□ No
Answer if you will be 18 ye	ars or older (an	nd out of high school) at the
time of this trip: \square Yes \square N	lo	
Have you completed the Die	ocesan Youth P	rotection Training?
☐ Yes ☐ No		
Important Information:		
 \$4,000 per person (not finalized until air rates are published in 2023) 		
TransportationOvernight accommodations		
 Walking tour of Lisbon, Portug 	al	
 Tours of Fatima, Aljustriel and 		
World Youth Day Registration	ouncar orn	
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ROOMMATES		
Please list your roommate preference		
selected roommates but we may no	t be able to accor	mmodate each request fully.
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3.	4	
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		Office Use Only
	`	Date Received
	-	Amount Paid
	-	Scholarship
	-	Waivers & Forms Complete
	-	Entered Computer
	-	

NOTE

You will not be fully registered until all forms and waivers are completed and received along with full deposit payment of \$350.

In the event that maximum capacity is reached, we will create a "wait list" based on the date and time in which registrations are received.

Due to Cancellation policies with the hotel and transportation companies we are unable to provide refunds for those unable to attend. Registrants are required to purchase travel insurance through Dube Travel after registration, (207) 784-2916.

IMPORTANT

ANY participant who is 18 years or older and out of high school at the time of the trip MUST complete the Diocesan Youth Protection Training and will need a background check. Please contact your parish Youth Protection Coordinator to make arrangements. No exceptions can be made to this policy.

RETURN OF REGISTRATION FORMS AND PAYMENTS:

CHECKS: Make payable to Catholic Diocese of Evansville – WYD

(Include name of participant in memo line on check)

MAIL: Catholic Diocese of Evansville

World Youth Day, Lisbon 4200 N. Kentucky Ave.

P.O. Box 4169

Evansville, Indiana 47724-0169

