



REGISTRATION FORM

(Please complete one per family or group.)

WE'RE GLAD YOU'RE COMING TO ROAD TO RESURRECTION!

Names of adults in your family or group: _____

Names of children in your family or group: _____

Address: _____

Phone number: _____

Email: _____

Road to Resurrection begins at 15-minute intervals during our event. Please choose a time that is available from the Road to Resurrection Schedule. You and your family or group will need to arrive about 10 minutes before this time so you can join in this adventure!

Time you have signed up to begin: _____