



Teen Leadership Training Weekend

Dates: October 19-21, 2018

Location: Pecometh Camp & Retreat Ministries • 136 Bookers Wharf Road • Centreville, MD 21617

Cost: \$80

Name of Attendee: _____ **Circle:** TLT or Staff

Attendee's Emergency Contact Person: _____

Contact Person's #: _____ **Relationship to Attendee:** _____

TLT Gender: Male or Female **TLT Age:** _____ **TLT Grade/Class in high school:** _____

Club Name: _____ **Church Name:** _____

Operational Track that the TLT will be starting this semester (Fall 2018)

Circle One: Administrative, Outreach, Teaching, Activities, Records, Counseling or Special Operations

Director's Name: _____ **Director's Contact phone #:** _____

Mentor's Name: _____

Payment:

- I am paying by check. (Enclosed – Payable to “Potomac Conference”)
- Please Bill my Church

Please send this form & check by October 9, 2018 to:

Pathfinder Ministry
Potomac Conference of SDA
606 Greenville Avenue
Staunton, VA 24401

Email: nancyc@pcsd.org

Fax: 540 886 5734