

YEC 2025 REGISTRATION FORM

SUNDAY AND MONDAY
November 23 & 24, 2025

Mail completed form and payment to:

YEC
Louisiana Baptists
P.O. Box 311
Alexandria, LA 71309-0311

Church _____

Church Address _____

City _____ State _____ Zip _____

Contact Person _____

Phone _____ Cell _____

E-mail: _____

ENTIRE EVENT: (No infants or children 6 years or under)

Entire event: \$50 x _____ [# of people] = \$ _____

After November 1: \$55 x _____ [# of people] = \$ _____

Handicap seating needed _____ [# of people in your group registration]

MONDAY ONLY: (includes concert)

Monday only: \$45 x _____ [# of people] = \$ _____