## HAMILTON COUNTY GREAT BANQUET GUEST RESERVATION REQUEST

The Great Banquet is a three-day experience of renewal, learning and sharing in an atmosphere of a Christian community. It is a different experience for each individual. It does not provide a climate for the solution of deep-seated problems, but is designed to help mature people work toward a deeper Christian way of life.

If married, couples are encouraged to attend at the same time, if possible. Each person must submit a separate reservation request. There is no charge for the weekend; however, a \$30.00 registration fee (payable to HCGB) is requested. Financial assistance is available if needed. Space is limited. You may be placed on a waiting list until space is available. Applicants will be notified of acceptance several weeks before the Great Banquet Weekend.

Today's Date:	
Name:	Age:
Name to appear on nametag if different than above:	
Mailing Address:	
City State Zip:	
Home Phone: () Cell Phone: (	)
E-Mail Address:	
We serve the deaf community during Great Banquet Weekends. I ar	n deaf - \Box Yes
Name of Church now attending:	
<ul> <li>Yes No If married, has your spouse attended a Great Ba</li> <li>Yes No If not, have they submitted an application for the If yes, what is his/her name?</li> </ul>	Great Banquet?
List medically necessary diet needs or food allergies (diabetes, gluten intolerant, etc).	
Please provide a list of medications and required times for administering if on special medication.	
Please advise if you have a health problem or physical concerns requiring special facilities:	
Emergency Contact Name: Phone	e: ()
Relationship:	
Return this completed reservation request along with your \$30 regi	
Sponsor's Name: Sponsor's Tel	ephone: ()
If you <b>do not</b> have a sponsor mail this form with the registration fee to: HCGB Registration, P.O. Box 1204, Noblesville, IN 46061	
Great Banquet Use Only: Banquet Attending: Reservation Received Spring Free Paid Sponsor Form Received Confirmation Mailed Confirm	Fall