

Illinois State Genealogical Society
2010 Fall Conference: October 23, 2010 – Hotel Pere Marquette, Peoria, Illinois
YOUTH WORKSHOP: 1:00 P.M. – 4:00 P.M.

YOUTH WORKSHOP REGISTRATION – Due at ISGS by September 15, 2010

***Information is required.**

*Name (Please Print) _____
Last First

*Mailing Address _____
Street

* _____ Illinois _____ * _____
City Zip County

*Phone number_(____)_____ *Age on 10/23/10 (circle one): 12 13 14 15

Have you ever visited a genealogical society? If so, where: _____

Have you ever attended a class or workshop in genealogy? If yes, please explain:

Have you ever attempted or succeeded in identifying any of your ancestors? If yes, please explain:

What do you hope to learn at this workshop?

*Do you have a computer and Internet access at home? (circle one) Yes No
*Is your parent/guardian attending the ISGS Fall Conference? Yes No

Parent/Guardian must sign this form giving you permission to attend the workshop. Send this form and the registration fee of \$18.00, (check payable to ISGS) to:

Illinois State Genealogical Society
P.O. Box 10195
Springfield, IL 62791-0195

My daughter/son has my permission to participate in the ISGS Youth Workshop on October 23, 2010 in Peoria, IL from 1:00 – 4:00 p.m. in the Illinois Room at the Hotel Pere Marquette. I will pick my daughter/son up at the Illinois Room at 4:00 p.m. The person authorized to pick up my son/daughter must sign below. All phone numbers where the parent may be reached must be noted under that signature.

* _____
Person authorized to pick up my child.
*Cell: _____

* _____
Parent Signature
*Ph. #'s: _____

OFFICE USE:

check # _____ information complete _____ YW registrant # _____