ILHS VISITORS' DAY REGISTRATION

In order to best serve you, it is very important for us to have registration information in advance. Please complete this form, and return to the address below.

Mail to: ILHS Visitors Day
Immanuel Lutheran College
501 Grover Road
Eau Claire, WI 54701
Or Email all information below to: jeff.schierenbeck@ilc.edu

Congregation:_____ City, State:_____

Pastor:_____ Email: _____

Arrival Day/Time:_____/_____ Departure Day/Time:_____/_____

Chaperon Names

Name	Housing Needed (please circle days needed)		
_____	Thurs	Fri	None
_____	Thurs	Fri	None
_____	Thurs	Fri	None
_____	Thurs	Fri	None

Student Names

Name	Grade	Gender(M/F)

(Append additional names if necessary)