

BEHOLD

FLY 2025 | JOHN 1:29

Information you will need to have ready to register as a **DRL**:

Name

Gender

Cell Phone Number

Email

Mailing address

Birth Date

Emergency Contact Name

Emergency Contact Phone Number

Group Attending FLY (Dropdown to select your church/group)

*Note Group Leader info will auto fill.

Health Insurance

Family Physician Information

Allergies

Medications

Background Check Agreement

2 References (Name, City & State, Phone Number)

Education

8 personal experience questions

Select your payment preference (Credit Card or Check)

Select your payment option (Deposit or Full Payment)