

**On-site Registration Form**  
**Annual Sessions 2017**

June 15-17 at Amigo Centre  
 26455 Banker Rd, Sturgis, MI 49091

✓ **Keep a copy for your records**

Report books: A copy of the report book will be available on the conference website.

\_\_\_\_\_

**Name:** \_\_\_\_\_

**Congregation/Organization:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

\_\_\_\_\_

**Check one:**

**Delegate**                       **Non-Delegate**

**Children to participate in youth activities?**

**No**     **Yes**

**Names, ages, and when present:**

\_\_\_\_\_

**Special needs (including mobility restrictions):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Registration**

<b>After June 1: on-site only</b>			
Delegate		x \$90	
No charge for family			
<b>Registration Total</b>			

**Meals: not guaranteed if registering after June 1**

Thursday	#	Cost	= \$
<b>Dinner</b> - Adult (non-pastor)		x \$8	
Child(ren) ages 4-10		x \$4	
Friday	#	Cost	= \$
<b>Breakfast</b> - Adult		X \$8	
Child(ren) ages 4-10		X \$4	
<b>Brunch</b> - Adult		x \$8	
Child(ren) ages 4-10		x \$4	
<b>Dinner</b> - Adult		x \$8	
Child(ren) ages 4-10		x \$4	
Saturday	#	Cost	= \$
<b>Breakfast</b> - Adult		X \$8	
Child(ren) ages 4-10		X \$4	
<b>Meal Total</b>			

**Dietary restrictions**  
 Check all options that apply:

Vegetarian: \_\_\_\_\_                      Gluten-Free: \_\_\_\_\_

Food allergies: \_\_\_\_\_

Other diet restrictions: \_\_\_\_\_

Subtotals:    Registration \$ \_\_\_\_\_

                  Meals \$ \_\_\_\_\_

**TOTAL DUE: \$ \_\_\_\_\_**