

2011 EQUIP CONFERENCE: CHURCH ROSTER

CHURCH NAME: _____ CHURCH CITY: _____

GROUP LEADER NAME: _____ PHONE: _____ EMAIL: _____

LOCATION (PLEASE CHECK ONE):

SEPTEMBER 24: MONROEVILLE A/G

OCTOBER 1: READING, PA (GLAD TIDINGS)

WORKSHOP CHOICES (PLEASE COMPLETE FOR EACH ATTENDEE)

NAME (PLEASE LIST NAMES OF ALL ATTENDEES)	WORKSHOP #1	WORKSHOP #2	WORKSHOP #3
	(10:30 AM - 11:30 AM)	(1:00 PM - 2:00 PM)	(2:00 PM - 3:00 PM)
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
10)			
11)			
12)			
13)			
14)			
15)			

CANCELLATIONS ARE REFUNDABLE UP UNTIL THE MONDAY PRIOR TO THE EVENT. IF YOU HAVE ANY QUESTIONS, CALL MEGAN: (717) 795-5921	TYPE	COST		NUMBER	TOTAL	PLEASE MAKE ONE CHECK PAYABLE TO: PENDEL
	EARLY REGISTRATION	\$29.00	x			
	REGULAR REGISTRATION (AT DOOR)	\$34.00	x			
	FULL-TIME STUDENT/HOME MISSIONS	\$24.00	x			
	FREE (SR. PASTOR OR GROUP LEADER)	\$0.00	x	1	\$0.00	
TOTAL AMOUNT ENCLOSED:						

Registration will occur at 8:30 AM on Saturday; event to conclude at approximately 3:00 PM.

FOR OFFICE USE ONLY: DATE: _____ CHECK #: _____ NAME: _____ AMOUNT: _____

EARLY REGISTRATION MUST BE POSTMARKED THE WEDNESDAY TWO WEEKS PRIOR TO THE EVENT DATE TO RECEIVE EARLY REGISTRATION PRICE!

(EARLY REGISTRATION DEADLINES: MONROEVILLE: 9/12; READING: 9/19)