

Registration

Please fill out **one(1)** form per person.

Please make copies to register additional guests.

(PLEASE PRINT)

Name _____

Church Represented: _____

City/State _____

Phone _____

E-mail _____

Have you been appointed by your church as a delegate to the business session?

Yes No

I would like to reserve a table for display.

Table size needed _____ Elec. Needed _____

CONFERENCE FEES

TOTAL

2 Day Conference Fee (\$40/person) = \$ _____

Friday Only Conference Fee (\$25/person) = \$ _____

Saturday Only Conference Fee (\$25/person) = \$ _____

MEALS

Friday Lunch (\$5.00/person) = \$ _____

Friday Dinner (\$15.00/person) = \$ _____

Saturday Lunch (\$5.00/person) = \$ _____

Total Amount Due: + \$ _____

Make checks payable to:

“Allegheny District”

Registration deadline is March 30



MAIL REGISTRATION FORM & PAYMENT TO:

Allegheny District Conference

c/o Kathy Dysart
6307 Helen St.
South Park, PA 15129

Additional brochures & registration forms may be downloaded at www.alleghenydistrict.com

Registration

Please fill out **one (1)** form per person.

Please make copies to register additional guests.

(PLEASE PRINT)

Name _____

Church Represented: _____

City/State _____

Phone _____

E-mail _____

Have you been appointed by your church as a delegate to the business session?

Yes No

I would like to reserve a table for display.

Table size needed _____ Elec. Needed _____

CONFERENCE FEES

TOTAL

2 Day Conference Fee (\$40/person) = \$ _____

Friday Only Conference Fee (\$20/person) = \$ _____

Saturday Only Conference Fee (\$20/person) = \$ _____

MEALS

Friday Lunch (\$5.00/person) = \$ _____

Friday Dinner (\$15.00/person) = \$ _____

Saturday Lunch (\$5.00/person) = \$ _____

Total Amount Due: + \$ _____

Make checks payable to:

“Allegheny District”

Registration deadline is March 30



MAIL REGISTRATION FORM & PAYMENT TO:

Allegheny District Conference

c/o Kathy Dysart
6307 Helen St.
South Park, PA 15129

Additional brochures & registration forms may be downloaded at www.alleghenydistrict.com

Registration

Please fill out **one (1)** form per person.

Please make copies to register additional guests.

(PLEASE PRINT)

Name _____

Church Represented: _____

City/State _____

Phone _____

E-mail _____

Have you been appointed by your church as a delegate to the business session?

Yes No

I would like to reserve a table for display.

Table size needed _____ Elec. Needed _____

CONFERENCE FEES

TOTAL

2 Day Conference Fee (\$40/person) = \$ _____

Friday Only Conference Fee (\$25/person) = \$ _____

Saturday Only Conference Fee (\$25/person) = \$ _____

MEALS

Friday Lunch (\$5.00/person) = \$ _____

Friday Dinner (\$15.00/person) = \$ _____

Saturday Lunch (\$5.00/person) = \$ _____

Total Amount Due: + \$ _____

Make checks payable to:

“Allegheny District”

Registration deadline is March 30



MAIL REGISTRATION FORM & PAYMENT TO:

Allegheny District Conference

c/o Kathy Dysart
6307 Helen St.
South Park, PA 15129

Additional brochures & registration forms may be downloaded at www.alleghenydistrict.com