## **PAPER REGISTRATION FORM**

## Online Registration is Preferred (and can be done even if sending a check)

The Online Form can be found at <a href="http://www.theNALCohio.org">http://www.theNALCohio.org</a> or on our Facebook page at <a href="https://www.facebook.com/OhioMissionRegionNALC">https://www.facebook.com/OhioMissionRegionNALC</a>

Using the online form makes the process easier and lessens the potential for errors.

Please register online (or return this form with payment) by <b>April 19</b> <sup>th</sup> to:  Ethel Briggs  1067 Laurelwood Road / Mansfield, OH 44907  419-756-7766 / ethelbriggs1@gmail.com  Cost: \$30 per person which includes continental breakfast and lunch (received before April 19 <sup>th</sup> ).  \$40 if received after April 19 <sup>th</sup> . (Vendors: \$20/person)  Checks payable to: Ohio Mission Region - NALC
Attendee Name (one per form):
Attendee Phone:
Attendee Email:
Attendee's Congregation Name & City where located: (Ex: St. John's Ev., Grove City)
Your Mission District: (see map online or in brochure & check one)
North West Ohio Southwest Ohio Southeast Ohio Southeast Ohio North Eastern Ohio
Attending As: (Check one)
Clergy Lay Delegate (representing a congregation) Guest Vendor
Fee Waiver:  If you are not a speaker or workshop leader, please leave this line blank. If you are a speaker for one of the workshops, your registration fee will be waived. Please indicate which workshop you will be leading so that we know how to record the waiver. If you are a speaker attending as part of a group, please DO NOT include yourself in the payment process. Your registration is sufficient.
Workshop descriptions and titles are included in the brochure. Please circle workshop preferences (choose up to two).
A B C D E
Attending only one workshop because I am a P-CAT team member. (Single workshop indicated)
If you have a <b>special dietary need for lunch</b> , please indicate what that is here and we will try to make arrangements to accommodate your need.