

Convention Registration Form – Part 2

Lutheran Women’s Missionary League
Missouri District, 20th Biennial Convention
June 6 - 8 of 2008, St. Charles Convention Center
Two Convention Center Plaza; Saint Charles, MO 63303

Prov 3:5-6



PLEASE PRINT **ONE PERSON PER REGISTRATION FORM**

Name: _____
Last First MI

Mailing Address _____ City _____ State _____ ZIP _____

() _____ () _____
 Daytime Phone _____ Evening Phone _____ E-mail _____

LWML Zone _____ Congregation Name _____ Congregation City _____

Are you a first-time attendee? Yes _____ No _____ Number of District Conventions attended (incl. this one) _____

I will be attending as: (Please check only one category)

- | | |
|---|--|
| <input type="checkbox"/> General Registration (non-voting member) | <input type="checkbox"/> Member of LWML District Board |
| <input type="checkbox"/> LWML Delegate | <input type="checkbox"/> Clergy |
| <input type="checkbox"/> Alternate LWML Delegate | <input type="checkbox"/> LWML Zone Counselor |
| <input type="checkbox"/> Young Women’s Representative (YWR) | <input type="checkbox"/> Guest |

REGISTRATION DETAILS

- | | | |
|---|---|--------------|
| 1. Registration Postmarked <i>on or before</i> May 6 | \$ 50.00 | 1. _____ |
| 2. LATE registration postmarked <i>AFTER</i> May 6 | \$ 60.00 | 2. _____ |
| 3. Clergy / Zone Counselor | No Charge for Registration | 3. No Charge |
| 4. Meal Package (includes Saturday Lunch plus Saturday Banquet and Entertainment) | \$ 50.00 | 4. _____ |
| 5. Saturday Banquet and Entertainment ONLY | \$ 30.00 | 5. _____ |
| 6. Mission Walk 6:00—7:00 A.M. Saturday, June 7
Walker _____ Virtual Walker _____
(S,M,L,XL \$10, 2XL \$11.00 3XL \$12.00) circle size | \$ 10.00, \$ 11.00, or \$ 12.00 (incl Tee) | 6. _____ |
| 7a. Polo Shirt (circle size) S, M, L, XL. _____ x \$16.00 | POLOS: Order one size larger than you usually wear. | 7a. _____ |
| 7b. Polo Shirt XXL _____ x \$18.00 | | 7b. _____ |
| 7c. Polo Shirt XXXL _____ x \$20.00 | | 7c. _____ |
| 8. Convention Pin _____ x \$ 4.00 | | 8. _____ |
| 9. Convention Charm _____ x \$ 4.00 | | 9. _____ |

TOTAL REMITTANCE \$ _____

Check payable to: LWML 2008 District Convention Fund

(Enclose a self- addressed, stamped envelope--SASE)

Mail payment and registration form to:

Bernice Haley
1133 Sunset Green Dr.
O’Fallon, MO 63366

billbernice2@netzero.net Phone: 636-978-7723

Registration Deadline May 6, 2008

- NO refunds after June 1, 2008.
- All registrations will be acknowledged in SASE.
- Registrations will not be processed until payment is received.
- No refunds for less than \$1.00 will be processed.

Please indicate number attending Friday evening:

- 1) Singing at 7:00 PM; Worship at 7:30 PM
Please include family members _____
- 2) Holy Communion on Friday evening during service.
All confirmed LCMS members are invited.
Number to receive communion _____

Friday Night Dinner

Not part of the meal plan! To be prepared with enough food, Embassy Suites would like to know if you are interested in ordering from their menu for dinner on Friday.

Yes _____ No _____

Convention Choir

Indicate if you will be singing in the Convention Choir. Music and information will be sent to you upon registering. Please wear white top and black skirt or pants.

Soprano I _____ Alto I _____ Tenor _____
 Soprano II _____ Alto II _____

Special Needs

Hearing-impaired seating w/interpreter? Y _____ No _____
 Do you need handicapped parking? Yes _____ No _____
 Handicapped seating? Yes _____ No _____

List all critical food allergies:

