

9th Annual Pastors Conference

September 25 & 26, 2006

REGISTRATION FORM

(one registration per form please)

Name _____

Address _____

City _____

State/Zip _____

Phone _____

E-mail _____

Meeting/Church _____

Registration fee \$40.00

Please indicate vegetarian preference

Indicate meals you will attend.

Mon.-B__L__D__ ; Tue.-B__ L__

Send registration and payment to:
EARLHAM SCHOOL OF RELIGION
228 College Avenue, Richmond, IN 47374

Questions?
Call 1-800-432-1377 or 765-983-1423
cummiri@earlham.edu