

89th Annual District Council Registration Form

Leadership Resource Summit

Mail or fax completed form and fees to:

Southern California District
 17951 Cowan • Irvine, CA 92614
 Fax: (949) 252-8435

Pre-Registration Deadline
March 15, 2008

PLEASE REGISTER ONLY ONE PERSON PER FORM - Copy as needed for extra forms

Name _____

Address _____

City _____

Church _____

Position: _____ Senior Pastor
 _____ Associate / Staff Pastor
 _____ Missionary/Missionary Associate
 _____ Delegate
 _____ Board Member
 _____ Church Member
 _____ Pastor's Spouse
 _____ Other _____

Home Phone (_____) _____

Office Phone (_____) _____

Fax Number (_____) _____

E-Mail _____

AGE GROUP

_____ 18-29 _____ 30-39 _____ 40-49
 _____ 50-59 _____ 60-69 _____ 70+

PAYMENT METHOD

Check _____ (Enclosed) Credit Card _____

Payment by Credit Card:

 Visa _____ MasterCard _____

Card #: _____ - _____ - _____ - _____

Expires: _____ / _____

Signature _____

Date _____

REGISTRATION FEES

Pre-Registration Deadline is March 15, 2008

Credentialed Ministers must register at their credential level.

Certified Ministers who are senior pastors must register as a Church Delegate to vote.

Please mark one:	Pre-Registration	On-Site
_____ Ordained	\$89.00	\$99.00
_____ Licensed	\$89.00	\$99.00
_____ Church Delegate*	\$89.00	\$99.00
_____ Certified Minister	\$75.00	\$85.00
_____ Guest / One Day	\$30.00	\$40.00

*Must be accompanied by Church Delegate Authorization

SPECIAL FUNCTIONS*

_____ \$28.00 Heritage Luncheon (1075)
 (Free for registered Senior Retired Minister & spouse)
 _____ \$28.00 Project Hope Luncheon (5020)
 _____ \$20.00 Speed-the-Light Luncheon (3135)
 (Cost of the STL Luncheon is subsidized by General Council)

*All ticket sales are non-refundable.

REGISTRATION PROCESSING

Registration Fees (1070) \$ _____

Special Function Fees \$ _____

**Total Registration and
 Special Function Fees for
 Individual Registrant** \$ _____

SPANISH TRANSLATION

_____ YO PIDO AUDÍFONOS PARA TRADUCCIÓN AL ESPAÑOL.

CHILD CARE REGISTRATION

See Child Care Registration Information. **DO NOT INCLUDE CHILD CARE FEE ON THIS FORM.**

FOR OFFICE USE ONLY	
Cash	\$ _____
Pers. Check	# _____ \$ _____
Church Check	# _____ \$ _____
Credit Card	\$ _____
Total	\$ _____