

Conf. Title: _____

Date: _____

GROUP REGISTRATION FORM



Group Leader's Name: _____

Phone #: _____ E-Mail: _____

Church or Organization: _____

Church/Org. Address: _____

(Please Print Clearly)

NAME		PHONE # / E-MAIL	PAID
First:		Phone:	Check #:
Last:		Email:	Cash:

First:		Phone:	Check #:
Last:		Email:	Cash:

First:		Phone:	Check #:
Last:		Email:	Cash:

First:		Phone:	Check #:
Last:		Email:	Cash:

First:		Phone:	Check #:
Last:		Email:	Cash:

First:		Phone:	Check #:
Last:		Email:	Cash: