

Announcing: The Eastern Association Spring Meeting



"Embracing the Vision...Cracking the Codes"

Saturday, May 6th, 9 a.m. Registration

Grace UCC, Sauk Village

REGISTRATION INFO (Please Print Legibly):

Name: _____

Name as it should appear on Nametag: _____

Church & Town: _____

Home Address: _____

Home Phone: () _____ Day/Cell Phone: () _____

Email Address (PLEASE PRINT): _____

PLEASE CHECK ALL THAT APPLY:

____ Adult Delegate ____ Adult Visitor ____ Youth Delegate ____ Youth Visitor

____ Laity ____ Retired Clergy & Spouse/Partner ____ Clergy ____ In-Care Student

Special Needs (Please Specify): _____

____ Vegetarian Meal

____ Childcare Needed**

**Please give Name(s) & Age(s) of Child(ren) if Childcare is checked above: _____

REGISTRATION FEE: (Please Circle)

Adult: \$20.00

Youth: \$10.00

(No Charge for In-Care Student(s) or Retired Clergy & Spouse/Partner)

(OVER FOR INSTRUCTIONS)

Please **copy** the **Front of this form** and send a completed one for **EACH ATTENDEE**

Also be sure to enclose the Registration Fee which includes lunch.

Make checks payable to: **Illinois Conference UCC**

Note: You may include one check for all attendees if desired

MAIL THIS ENTIRE FORM WITH PAYMENT BY Friday, April 28th TO:

Western Association Office: 1409 R Kelly Ave., Peoria Heights, IL 61616

OR:

Phone Reservation to Connie Owens at the Western Office: (309) 685-5929

OR:

Scan and Email Reservation to Connie Owens: ilconfconnie@gmail.com

<p><u>SPECIAL NOTE:</u> Please remember the Association must pay for all registered meals so if you decide not to attend at the last minute (other than an emergency) and have not prepaid you will be asked to reimburse the Association for your meal.</p>
