



2018 ANNUAL MEETING REGISTRATION FORM

October 27, 2018
Knights of Columbus/Collins Club
1 Columbus Plaza, Collinsville, Illinois

**Register with payment before OCTOBER 1, 2018
for Early-bird Price**

Use a separate registration form for **EACH** person registering.

Note: Type or print your name as it should appear on your nametag.
*Required information.

Name* _____
 Street* _____
 City* _____ State* _____ Zip* _____
 Email _____ Phone _____
 Church* _____ City of Church* _____

Voting Member (Delegate Fee) Check one or more appropriate boxes below:

- Authorized Minister with standing in ISC Lay Delegate Conference Council

Non –Voting Member (Visitor Fee) Check one or more appropriate boxes below:

- Clergy without standing in ISC Lay Visitor or Spouse/children for meals Member in Discernment Visitor/Display Representative Please list the name of your institution, business, or ISC Team _____

REGISTRATION FEE:

Early Bird Fees below. (After October 1, fees are \$70/\$45/30)

- \$65 **Delegate Fee (Voting Member)** (Includes the cost of registration, all advance materials, worship materials, breakfast, lunch & dinner on Saturday.) _____
- \$ 40 **Visitor Fee (Non-Voting Member)** (Includes breakfast, lunch & dinner on Saturday.) _____
- \$ 25 Dinner (noon) ONLY Visitor Fee (This is included in Delegate and full Visitor Fee.) _____
- Require Special Diet (please specify) _____
- Require handicapped accessibility _____

TOTAL AMOUNT ENCLOSED _____

Registration will not be complete until payment is received.

Refund Policy: *Written refund requests will be honored, less 10% for administrative processing, until September 30, 2018. If it is necessary for Illinois South Conference to cancel the event, full refunds will be given.*

REGISTRATION DEADLINE: October 1, 2018 (for Early-bird Price)

Send your registration form and check made payable to:

Illinois South Conference, 1312 Broadway, Highland, IL 62249 or go to www.iscucc.org to register online.

For Illinois South Conference Office Use Only:

Date _____ Amt Paid \$ _____ Church Check # _____ Individual Check # _____