

2018 National Conference for Women

Sponsored by American Baptist Women's Ministries, American Baptist Churches USA

Program and Housing Registration Form

July 19-22, 2018 • Judson University in Elgin, Illinois



Email address _____

Name _____
Title First Last

How would you like your first name to appear on your nametag? _____

Mailing address _____

City/State/Zip _____

Phone _____
Cell Home

Church you attend _____
Name City/State

Select your age:

☐ 18-35 ☐ 36-45 ☐ 46-55 ☐ 56-65 ☐ 66-75 ☐ 76+

Is this your first time attending a national AB Women's Ministries' event? ☐ Yes ☐ No

How did you hear about this conference?

- ☐ Event Postcard
☐ Email Promo or *Leader's Reader*
☐ AB Women's Ministries Website
☐ My Region's ABWM Newsletter
☐ Word of Mouth
☐ American Baptist Women in Ministry (ABWIM)
☐ Personal Invitation by _____

Any dietary needs (Gluten Free, Vegetarian, etc.)?

Any special needs?

Emergency Contact

Full Name _____

Best Phone Number _____

Alternate Phone Number _____

Address _____

Calculating Your Fees

| | Total Due |
|--|-----------|
| <input type="checkbox"/> Campus Package – \$310 if postmarked before May 1; \$335 after May 1 <ul style="list-style-type: none"> program fee 3-night stay in a double-occupancy or triple-occupancy room at Judson University (<i>arriving on Thursday and departing on Sunday</i>) breakfast/lunch/dinner meal plan (<i>starting with Thursday dinner and ending with Sunday breakfast</i>). Please assign _____ as my roommate(s). <input type="checkbox"/> I understand Judson University's lost key policy and will pay American Baptist Women's Ministries \$100 if my key is not returned at check-out. | \$ _____ |
| <input type="checkbox"/> Hotel Package – \$185 if postmarked before May 1; \$210 after May 1 <ul style="list-style-type: none"> program fee lunch/dinner meal plan (<i>starting with Thursday dinner and ending with Saturday dinner—Breakfast is on your own</i>). <i>Make your hotel arrangements on your own. For hotel suggestions, visit www.abwministries.org/conference.</i> | \$ _____ |
| <input type="checkbox"/> Commuter Package – \$145 if postmarked before May 1; \$170 after May 1 <ul style="list-style-type: none"> program fee* lunch on Friday and Saturday <i>*Program fee includes Thursday evening and Sunday morning, plus all day Friday and Saturday.</i> | \$ _____ |
| Total Amount Due | \$ _____ |

Payment

☐ Enclosed is my check payable to AB Women's Ministries.

☐ Charge my credit card:

☐ Visa
 ☐ MasterCard
 ☐ American Express
 ☐ Discover

Account Number: _____

Exp. Date: _____ Security Code: _____

Signature: _____

Mail form and payment to: AB Women's Ministries, PO Box 851, Valley Forge, PA 19482

Registration confirmation will be emailed to you if you provided an email address. If you want a written confirmation by U.S. mail, please include a business-sized, stamped, self-addressed envelope with your registration.