

REGISTRATION FORM

SFCNA 11TH NATIONAL CONFERENCE July 22 - 25, 2010 – Chicago, IL

First Name	Last Name	
Street Address		
City	State	Zip Code
Phone Number	Email Address	
Local Church		

Additional Family Members

	Adults (Names)	Children (Names)	Gender	Age
1				
2				
3				
4				
5				
6				
Children (Ages 3-12) - \$60 on or before May 31st and \$70 after May 31, 2010		_____ # of Child(ren)	X	\$_____ per Child =
Adults (Ages 13 and above) - \$70 on or before May 31st and \$80 after May 31, 2010		_____ # of Adult(s)	X	\$_____ per Adult =
			Total	=

Hotel Information

The Grand Hotel & Suites
 5550 Grand Avenue | Gurnee IL 60031
 (847) 249-7777 | www.gurneegrandhotel.com
 Attendees must book the hotel room individually
 Rate: \$70 plus tax per night before July 7, 2010
 Group Name: Sharon Fellowship (SFCNA Conference)

I, as an attendee of the 11th SFCNA National Conference acknowledge and accept full responsibility for the safety and liability of my family and myself. In case of any emergency, I will not hold the Executive/ National/Local committee or any other officials of the conference responsible. Any damage to the hotel room or church caused by my family or myself will be my responsibility.

Signature _____ Date _____

Please send this form along with a check payable to "SFCNA" before May 31, 2010. All cancellation requests must be made before May 31, 2010. No refunds will be issued after this date. Thank you for your cooperation and we look forward to your attendance at the Conference.

Sharon Fellowship Church of Chicago
 5404 67th Street
 Kenosha, WI 53142
 www.sfccna.com