"Shekinah" Women's Conference 2010
October 8th – 10th

Registration Form

(We ask that every person attending the conference to please register)

Please print legibly or type. Feel free to copy this form.

Date: _____ / _____ / _____

Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone#: _____ Evening Phone#: _____

E-Mail: _____ Cell Phone#: _____

Facebook ID: _____ Twitter ID: _____

Church / Affiliation: _____

Church Web Site: _____

Registration Fees:

$50 per person (July 1 – Sept. 14, 2010) // $60 per person (September 15, 2010 – Oct 7, 2010)

Total Enclosed: $_____

On-site Registration:

On-site registration will take place at Laurel Lakes Christian Center, 12 N 2nd Street, Laurel, MD 20723.

Saturday Sessions Registration: [ ] Yes, I plan to attend the Saturday Morning Sessions

[ ] No, I will not attend the Saturday Morning Sessions

Methods of Payment:

[ ] Check# _____ [payable to LLCC (Laurel Lakes Christian Center)]

[ ] Money Order #: _____

[ ] Master Card [ ] Visa

Card#: _____ Exp. Date: _____ 3 Digit Code#: _____.

Cardholder's Signature: _____ Date: _____.

To pay with your credit card: www.paypal.com use email address LLCC2@VERIZON.NET

***** Please do not send cash via mail.**

By Mail:

Mail Form and Payment to:
Laurel Lakes Christian Center
P. O. Box 657
Laurel, MD 20725
For more information call: (301) 317-4444

Cancellation Policy

Cancellations must be made in writing by September 10, 2010. An administration fee of $20.00 per person will apply to all cancellations made by this date. There will be no refunds after the cancellation deadline.