Church Name:	Pastor:	City:	State:	
(pay	ment must be receive	ed with registration	n)	
First Name Last Address			Last	
Phone Email:	PhoneEmail:	Phone Email:		
First Name Last Address			Last	
Phone Email:	PhoneEmail:	PhoneEmail:		
First Name Last Address			Last	
Phone Email:	PhoneEmail:	PhoneEmail:		
First Name Last Address			Last	
PhoneEmail:	Phone Email:	Phone Email:		