

JUN 2 \_\_\_\_\_

OCT 2 \_\_\_\_\_

# Heart of America Council of Churches REGISTRATION FORM



**TITLE:** \_\_\_\_\_

<b>LAST NAME</b>	<b>FIRST NAME</b>
<b>ADDRESS</b>	<b>CITY/STATE/ZIP</b>
<b>HOME PHONE</b>	<b>CELL PHONE</b>
<b>BUSINESS PHONE</b>	<b>EMAIL ADDRESS - (circle your choice State or All info)</b>

<b>CHURCH NAME</b>
<b>PASTOR'S NAME</b>
<b>CHURCH ADDRESS</b>  City/State/Zip

## REGISTRATION INFORMATION

<b>GENERAL BODY</b> Pastor-\$10 Minister-\$7 Lay Member - \$5	<b>CHRISTIAN EDUCATION - \$5</b>	<b>HEALTH PROF - \$5</b>
<b>MEN'S MINISTRY - \$5</b>	<b>MINISTER'S WIVES - \$5</b>	<b>USHERS - \$5</b>
<b>WOMEN'S MINISTRY - \$5</b>	<b>YOUNG PEOPLE - \$5</b>	<b>HACC Chairman Offering -</b>

**GRAND TOTAL** \_\_\_\_\_

Amount Paid \_\_\_\_\_

Cash

Office Use Only

Check/Money Order # \_\_\_\_\_