

Salt Lake City Diocesan Council of Catholic Women

September 11-12, 2021 Convention Registration Form

- Registrations, including all Woman of the Year banquet guests, must be postmarked on or before 8/11/2021.
- Banquet seating is based on when registrations are received.
- *If possible, please submit registration by parish, paying with one check payable to "DCCW".*
- Please list the guests of the Woman of the Year together to aid in banquet seating.
- Banquet tables are assigned in groups of ten (10).
- Available meal substitutions due to special dietary needs are at the discretion of the hotel.
- **RSVP** – If you wish to attend the Spanish Speaking Panel discussion with Maria Johnson, Keynote Speaker.
- **No refunds after 8/28/2021**

Reservation Contact Name: _____

Phone: _____ Email: _____

Parish: _____ Deanery: _____

Woman of the year: _____

Religious attending (with title): _____

	<u>Print Names Clearly</u> (For Name Badges)	Full convention \$125 (A)	Saturday Only \$60 (B)	Banquet Only \$40 (C)	Sunday Only \$30 (D)	✓ IF FIRST TIME Attendee	✓ IF WOY GUEST	✓ IF Spanish Work- Shop
1								
	Special Diet/Needs:							
2								
	Special Diet/Needs:							
3								
	Special Diet/Needs:							
4								
	Special Diet/Needs:							
5								
	Special Diet/Needs:							
6								
	Special Diet/Needs:							
7								
	Special Diet/Needs:							
8								
	Special Diet/Needs:							
9								
	Special Diet/Needs:							
10								
	Special Diet/Needs:							

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	<u>Print Names Clearly</u> (For Name Badges)	Full convention \$125 (A)	Saturday Only \$60 (B)	Banquet Only \$40 (C)	Sunday Only \$30 (D)	✓ IF FIRST TIME Attendee	✓ IF WOY GUEST	✓IF Spanish Work- Shop	
11									
		Special Diet/Needs:							
12									
		Special Diet/Needs:							
13									
		Special Diet/Needs:							
14									
		Special Diet/Needs:							
15									
		Special Diet/Needs:							
16									
		Special Diet/Needs:							
17									
		Special Diet/Needs:							
18									
		Special Diet/Needs:							
19									
		Special Diet/Needs:							
20									
		Special Diet/Needs:							

TOTAL: PACKAGE A _____ x \$125 = _____

Total 1st Time Attendees: _____

PACKAGE B _____ x \$ 60 = _____

PACKAGE C _____ x \$ 40 = _____

PACKAGE D _____ x \$ 30 = _____

Applicable Late fees after 8/11/21: \$10 ea. _____

Total: \$ _____

TOTAL AMOUNT PAID: \$ _____

Please add \$10.00 per registrant if not postmarked
on or before August 11, 2021

Retain a copy of this form and payments for your record.

MAKE CHECKS PAYABLE TO: DCCW

Mail to Convention Registration Chair:

Cheryl Johnson
2407 E. Summerfield Ln.
Sandy, UT 84092
Home: 801-572-6480
cjjohnson@q.com