



“ONE MINDED”
 “Complete my joy by being of the same mind, having the same love, being in full accord and of one mind.” Philippians 2:2 (ESV)

**EASTERN REGIONAL ASSOCIATION
 ANNUAL CONVENTION – OCTOBER 20 – 21, 2017**

DELEGATE Credential / Registration & Meal Form

Name _____ Tel. _____

Address _____ City _____ State _____ Zip _____

Email _____

Church _____ Conference _____

REGISTRATION DUE BY OCTOBER 06, 2017

I am attending this Convention in the following capacity: (Please select one of the three options)

Delegate _____ (\$27 registration fee)
(If Delegate please check one below)

a. Ordained Minister _____
 b. Non-Ordained Credentialed Pastor _____
 c. Church _____
 d. Conference _____
 e. Officer of Region _____
 f. Associate Member _____

If registering as an Associate Member, please include your \$35 Associate Member fee along with Registration Fee.

Guest _____
(\$27 Registration Fee)

Retired Ordained Minister _____
No registration fee required
 _____ I plan to serve as an Ordained Minister Delegate.

I will need a printed copy of the reports.

I wish to register for the Convention Choir

This is to certify that the above named person has been appointed to serve as a delegate to the 2017 Annual Meeting of the Eastern Regional Association representing (n/a if Guest or Retired Ordained Minister)

 Church/Organization

Authorized Signature _____ Position _____

Please select from the following meal options



Meal Plan Includes:
 Friday Lunch
 Friday Dinner/Dessert
 Saturday Refreshments
 Saturday Lunch
 \$ 35 _____

Individual Meals

Friday Lunch (\$10) ____
 Friday Dinner (\$17) ____
 Saturday Morning Refreshments & Lunch (\$10) ____

Please indicate any dietary restrictions you may have:
 Food Allergies ____
 Diabetes ____
 Gluten Free Diet ____
 Other _____