

**NCD Discernment for Presbytery Teams  
September 29 – October 2, 2008  
Registration Form**

Name \_\_\_\_\_ Presbytery \_\_\_\_\_  
 Preferred Name on Name Badge \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email Address \_\_\_\_\_

**Housing Information (please check all that apply):**

**Conference housing is from 9/28 – 10/2. Additional housing at the discounted rate of \$109.00 is available two nights before or two nights after conference. Some suites may be available for an additional fee; contact Church Growth office for availability and cost.**

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

<b>Lodging:</b>	<b>Fees:</b>
Florida Commuter- \$300 (includes registration fees and meals)	_____
Single Occupancy- \$700	_____
Double Occupancy – \$340/ per person cost	_____
I will room with _____	
Assign me a roommate	
Additional nights requested (indicate dates) _____ X \$109	_____
	<b>Total:</b> _____

**Payment:**

<b>Credit Card</b>	<b>Visa</b>	<b>Master Card</b>	<b>American Express</b>
<ul style="list-style-type: none"> <li>• Card Number _____ Exp. Date. _____</li> <li>• Name on Card _____</li> <li>• Amount Authorized to charge _____</li> <li>• Signature _____</li> </ul>			

Check Amount \_\_\_\_\_ (Make checks payable to PC(USA))

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**\*\* Registrations must be RECEIVED by 9/3/08 \*\***

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