

Advisory/Visitor Registration \$25.00 Each

Registration Available Online

If by mail, complete this form

(Duplicate as needed)

Name of Congregation _____

City _____

Conference _____

Rev ___ Intern ___ Name _____ M ___ F ___

(print or type)

(check one)

Mailing Address _____

(Street)

(City)

(Zip)

Phone _____ E-mail _____

Advisory _____ Visitor _____ **Check one**

Meals ordered: (by May 16th)

Friday noon: _____ (\$7.50) \$ _____

Friday banquet: _____ (\$13.00) \$ _____

Continental Breakfast: _____ (\$5.00) (or) Mission Prayer Breakfast _____ (\$8.00) \$ _____

Saturday noon: _____ (\$9.00) \$ _____

Total Meals \$ _____

Campus Housing needed? Yes _____ No _____ **Room needed for Thurs. _____ Fri. _____ Sat. _____**
(check one) (check all that apply)

Single room \$23 per person x number of nights _____ = \$ _____

Double room \$17 per person x number of nights _____ = \$ _____

Housing Deadline

May 21, 2008

Roommate Preference _____

Please specify any special needs such as: dietary restriction, listening devices, etc:

Break-Out Sessions: Please check the one you plan to attend:

- ____ 1. "Book of Faith" Initiative, Jodi Hanson and Suzanne Hansen
- ____ 2. Be Church Together, Cathy Larson
- ____ 3. Walking together-the Partnership ministries of the SD Synod, Panel
- ____ 4. Coordinating Volunteers, Mary Schultz
- ____ 5. 2009 National Youth Gathering, Suzanne Hansen and Mara Stillson
- ____ 6. World Hunger, Erika Lehmann

Registration Fee (\$25) \$ _____

Housing fee (as per above) \$ _____

Total cost of meals \$ _____

Total Enclosed \$ _____

All payments must be made payable to SD Synod and mailed to:

SD Synod, Augustana College, Sioux Falls, SD 57197

Questions: 605/274-4011