

**REGISTRATION FORM**

**SFCNA 9<sup>TH</sup> NATIONAL CONFERENCE**  
**July 10-13, 2008**

**SECTION A**

|                 |  |                |           |
|-----------------|--|----------------|-----------|
| First Name:     |  | Last Name:     |           |
|                 |  |                |           |
| Street Address: |  |                |           |
|                 |  |                |           |
| City:           |  | State:         | Zip Code: |
|                 |  |                |           |
| Phone Number:   |  | Email Address: |           |
|                 |  |                |           |
| Local Church:   |  |                |           |
|                 |  |                |           |

**Attendees :**

|    | ADULTS (Name) | CHILDREN (Name) | GENDER | AGE |
|----|---------------|-----------------|--------|-----|
| 1. |               |                 |        |     |
| 2. |               |                 |        |     |
| 3. |               |                 |        |     |
| 4. |               |                 |        |     |
| 5. |               |                 |        |     |
| 6. |               |                 |        |     |

**Children (12 and younger):**  
 \$65.00 before May 31<sup>st</sup>, 2008  
 \$75.00 after May 31<sup>st</sup>, 2008

**Adults (13 and older):**  
 \$75.00 before May 31<sup>st</sup>, 2008  
 \$85.00 after May 31<sup>st</sup>, 2008

Children (3 to 12): \_\_\_\_\_ Child X \$ \_\_\_\_\_ per Child =

Adults (13 and above): \_\_\_\_\_ Adults X \$ \_\_\_\_\_ per Adult =

TOTAL =

Attendees must book the hotel room individually at either [www.detroitmadisonheights.hamptoninn.com](http://www.detroitmadisonheights.hamptoninn.com) or (248) 585-8881 ext. 508. Mention that you are booking a room with in connection with the Sharon Fellowship Conference in July to receive the group rate of \$72.45/night.

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List any allergies your children may have:

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Are your children potty trained? Yes  No If you need transportation to and/or from Detroit Metro Airport only, please write in or email [sfcmichigan@gmail.com](mailto:sfcmichigan@gmail.com) the following information:

| Arrival Date   | Arrival Time   | Airline | Flight # | Gate |
|----------------|----------------|---------|----------|------|
|                |                |         |          |      |
| Departure Date | Departure Time | Airline | Flight # | Gate |
|                |                |         |          |      |

**SECTION B:** Only complete section B if you are interested in becoming a sponsor**Class 1 (Mega Sponsor)**

\$1000 or more, 4-5 registered participants, All benefits included along with accommodations, free registration, half page ad in the songbook, t-shirts, as well as all other compliments.

**Class 2 (Grand Sponsor)**

\$500, 3-4 registered participants, all included except accommodations and ads.

**Class 3 (Sponsor)**

\$250, 1-2 registered participants, all included except accommodation and ads.

What class sponsorship are you interested in? (check one)

 Class 1 (Mega Sponsor)
                         
  Class 2 (Grand Sponsor)
                         
  Class 3 (Sponsor)
**SECTION C:**

I, as an attendee of the 9th SFCNA National Conference acknowledge and accept full responsibility for the safety and liability of my family and myself. In case of any emergency I will not hold the Executive/ National/Local committee or any other officials of the conference responsible. Any damages to the hotel room or church caused by my family or myself will be my responsibility.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please send this form along with a check payable to "SFCNA" before May 31<sup>st</sup>, 2008. All cancellation requests must be made before May 31<sup>st</sup>, 2008. No refunds will be issued after this date. Thanks for your cooperation and we look forward to your attendance at the Conference.*

SHARON FELLOWSHIP CHURCH OF MICHIGAN  
P.O. Box 1582  
Troy, MI 48099  
[www.sfcmichigan.com](http://www.sfcmichigan.com)