



Armorbearers

LEADERSHIP CONFERENCE

2005

PRE-REGISTRATION DEADLINE – MARCH 4
REGISTRATION AFTER MARCH 4
MUST BE DONE ONSITE.
FOR ADDITIONAL INFO CALL 301-702-3020

~ HOW TO REGISTER ~

REGISTER ONLINE AT www.carolinachurch.org

FAX YOUR COMPLETED FORM WITH CREDIT CARD PAYMENT TO **301-702-3026**

MAIL YOUR COMPLETED FORM WITH PAYMENT TO:

ARMORBEARERS LEADERSHIP CONFERENCE
C/O CAROLINA CHURCH
4516 BEECH ROAD
TEMPLE HILLS, MD 20748

Please Print or Type. One Registration Per Form. Group registrations must be submitted at the same time. Payment must be included. Forms submitted without payment will not be processed.

REGISTRANT INFORMATION	SPECIAL NEEDS
Name _____	<input type="checkbox"/> Check here if you have a disability we should be aware of. <input type="checkbox"/> Check here if you have a dietary need we should be aware of. Please attach a written description of your needs and how we may assist.
Name as you want it on badge _____	
Title _____	
Church/Organization _____	
Address _____	
City _____ State _____ Zip Code _____	
Phone _____ Fax _____	
E-Mail _____	

REGISTRATION FEES				
INCLUDES ALL CONFERENCE SESSIONS, MATERIALS AND LUNCH				
	Early Registration Before 2/14	Pre-Registration After 2/14	After March 4 & On-site	Amount Due
GROUP REGISTRATION (<i>Group of 10 or more</i>) Attach separated sheet with names and title of all persons included in the Group registration.	\$50.00	\$60.00	\$75.00	\$ _____
INDIVIDUAL REGISTRATION	\$55.00	\$65.00	\$75.00	\$ _____
TOTAL AMOUNT ENCLOSED				\$ _____

PAYMENT PROCESSING – PAYMENT MUST ACCOMPANY FORM IN ORDER TO BE PROCESSED.
ALL CHECKS MADE PAYABLE TO: CMBC/ALC 2005

Credit Card: AMEX VISA MASTERCARD DISCOVER

Credit Card Number (*please print or type clearly*) _____ Expiration Date (MM/YY) _____

Name on Credit Card _____

Credit Card Billing Address (*if different from above*) _____

Cardholder Signature _____