



Mid-South District Convention June 28 - June 30, 2018
Advisory Delegate Information & Registration Card

Name of Congregation _____ Delegate No. _____
 Advisory Delegate Name _____
 City & State _____ Zip Code _____
 email address _____
 Cell Phone _____
 What will be your arrival date? _____

Will your spouse accompany you? Yes No

Please indicate meal & lodging choices below:

Meals:

Thursday	Dinner	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Friday	Breakfast	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Lunch	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	President's Reception	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Saturday	Breakfast	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Lunch	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Housing:

Thursday	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Friday	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Do you have special needs: i.e. Accommodations. Meals. etc? Yes No

Please specify: _____

Would you be willing to serve on a floor committee? Yes No

Registration to be held at the Hilton Hotel between
 11:00 a.m. and 3:00 p.m. on Thursday, June 28, 2018
 prior to the Convention opening

PLEASE RETURN THIS FORM IN ENCLOSED ENVELOPE BY MARCH 31, 2018