

PEACE *Among The* PEOPLES

July 28—July 31 | Associated Mennonite Biblical Seminary

Conference Registration Form

Name: _____

Denomination: _____

Street address: _____

City: _____ State: _____ Zip: _____

Phone: (____)_____ Email address: _____

I give permission to include contact information in event roster to be shared with participants. Yes No

Conference Fees

1. Full Registration: \$250

2. Partial Registration

	July 29	July 30	July 31
AM Session (\$50.00)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM Session (\$50.00)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Full Day (\$85.00)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Payment Enclosed

TOTAL \$ _____

Lodging

- I will arrange my own housing.
- Please send me a list of local hotels.

Payment Options

Check or money order (made payable to **Institute of Mennonite Studies**)

Credit Card

Choose one (circle): Visa MasterCard Discover

Card number: _____ Security code (3 digits): _____

Name as it appears on card: _____ Expiration date: _____

Total Amount to charge: \$_____

Signature: _____ Date: _____
I agree to pay above amount according to card issuers agreement.

Billing Address:

Same as above (page one).

Street address: _____

City/State/Zip: _____

Please mail completed registration forms and payments to:

Peace Among the Peoples
Associated Mennonite Biblical Seminary
3003 Benham Ave.
Elkhart, IN 46517

Or fax completed registration forms and credit card payments to:

(574) 295-0092
ATTN: Peace Among the Peoples