Aldersgate '09

Greensboro, NC • July 1-5, 2009

www.AldersgateRenewal.org

1-877-857-9372

Aldersgate '09 Registration Form (ONE FORM PER HOUSEHOLD)

General Information

LAST NAME	
FIRST NAME	
ADDRESS	
CITY/ST/ZIP	
PHONE	
E-MAIL	
CHURCH	

Name for name tag(s)

NAME	✓	Clergy	Ethnicity	mm/dd/yyyy Birthday
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			

Those above who are under 18 years of age must attend with a designated responsible adult. **PLEASE LIST SPECIFIC BIRTHDAY** of all participants for registration and demographic purposes.

**Group Discount to Aldersgate

To learn more about receiving discounts by becoming an ARM FAMILY CHURCH PARTNER (AFCP), and/or bringing a group to *Aldersgate '09*, please contact the ARM office, toll-free, at 1.877.857.9372, or E-mail info@aldersgaterenewal.org.

Payment Method

[ ] Check payable to "ARM" [ ] MasterCard [ ] Visa

CHECK #	
CARD #	
EXP DATE	
SIGNATURE	

Please mail completed form to:

ALDERSGATE RENEWAL MINISTRIES
121 EAST AVENUE
GOODLETTSVILLE, TN 37072

PH: 615.851.9192 OR 877.857.9372
FAX: 615.851.9372
INFO@ALDERSGATERENEWAL.ORG

Special Needs (PLEASE PUT AN * BY NAME(S))

I AND/OR SOMEONE IN MY PARTY WILL REQUIRE SPECIAL ASSISTANCE FOR
[ ] MENTALLY CHALLENGED CARE [ ] PHYSICALLY CHALLENGED CARE
[ ] OTHER (PLEASE EXPLAIN_____)

Pre-Conference (7pm Wed. July 1 thru 4 pm Thurs. July 2)

#OF PARTICIPANTS		COST		TOTAL
ADULTS ___	X	$58	=	$
MARRIED COUPLE	X	$110	=	$
YOUTH Rising 7th Gr. - Graduated Seniors ___	X	$38	=	$
ELEMENTARY Compl. Kind. - Rising 6th Gr. ___	X	$38	=	$
NURSERY/PRESCHOOL Birth - Rising Kind. ___	X	$38	=	$
Pre-Conference total				=$

Aldersgate '09 (7pm Thurs. July 2 thru Noon Sun. July 5)

#OF PARTICIPANTS		COST		TOTAL
ADULTS ___	X	$115	=	$
MARRIED COUPLE	X	$219	=	$
YOUTH Rising 7th Gr. - Graduated Seniors ___	X	$74	=	$
ELEMENTARY Compl. Kind. - Rising 6th Gr. ___	X	$74	=	$
NURSERY/PRESCHOOL Birth - Rising Kind. ___	X	$74	=	$
Aldersgate total				=$

One-Day Registration WILL ATTEND [ ] FRIDAY [ ] SATURDAY

#OF PARTICIPANTS		COST		TOTAL
ADULTS ___	X	$58	=	$
MARRIED COUPLE	X	$110	=	
YOUTH ___	X	$38	=	$
ELEMENTARY ___	X	$38	=	$
NURSERY/PRESCHOOL ___	X	$38	=	$
One-Day Reg. total				=$

Discounts APPLY TO ALL MEMBERS OF HOUSEHOLD

DISCOUNT BEFORE 11/15/08	LESS 30%
DISCOUNT BEFORE 5/15/09	LESS 15%
GROUPS OF 5 HOUSEHOLDS OR MORE** [NO OTHER DISCOUNTS APPLY] ***BEFORE 6/1/09***	LESS 20%
AFCP DISCOUNT** [NO OTHER DISCOUNTS APPLY]	LESS____%
Discount	- $

Maximum Registration Fee PER FAMILY, PER HOUSEHOLD

PRE-CONFERENCE + *ALDERSGATE*	$553
ALDERSGATE ONLY	$367
EVENT TOTAL	=$

Special Meal NO DISCOUNTS APPLY

CLERGY/SPOUSE BREAKFAST ___	X	$11 PER PERSON	=	$
Plus meal				+$

Cancellation Policy

All cancellation requests must be in writing and postmarked, faxed or emailed on or before June 26, 2009. A 15% transaction fee will be retained on all registration and meal refunds. Please allow up to 6 weeks for processing. Refunds are credited to the original purchaser. Registration and meal fees not refunded or transferred will be considered a donation to the ministry. Requests for family or health emergency related refunds or extenuating circumstance refunds must be postmarked by Monday, July 6, 2009.

A TAX DEDUCTIBLE GIFT TO ARM	+$
EVENT GRAND TOTAL	=$