

Multiple Registrations - Mail-In Form

<p>2023 CALVARY CHAPEL MIDWEST PASTORS' WIVES CONFERENCE</p> <p>March 17-18, 2023</p> <p>hosted at: CALVARY CHAPEL ELK GROVE 975 E. Nerge Roselle, Illinois</p>	<p>Registration/Payment Due By: March 5, 2023</p> <hr/> <p>Complete information can be found at: www.women.ccelkgrove.org/2023-pwc</p> <hr/> <p>Arrival/Registration: Friday, 5:30 p.m. Conference Ends: Saturday, 4:00 p.m.</p> <hr/> <p>Have questions? Call us at 847.895.3545</p>
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Attendee Information: *(please print clearly - and include emergency contacts for all attendees on back of this form*)*

<p>NAME: _____</p> <p>ADDR: _____</p> <p>C/S/ZIP: _____</p> <p>PHONE: _____</p> <p>E-MAIL: _____</p> <p>CHURCH: _____</p>	<p>NAME: _____</p> <p>ADDR: _____</p> <p>C/S/ZIP: _____</p> <p>PHONE: _____</p> <p>E-MAIL: _____</p> <p>CHURCH: _____</p>
<p>NAME: _____</p> <p>ADDR: _____</p> <p>C/S/ZIP: _____</p> <p>PHONE: _____</p> <p>E-MAIL: _____</p> <p>CHURCH: _____</p>	<p>NAME: _____</p> <p>ADDR: _____</p> <p>C/S/ZIP: _____</p> <p>PHONE: _____</p> <p>E-MAIL: _____</p> <p>CHURCH: _____</p>

Payments: *(All payments are non-refundable and do not include hotel accommodations)*

_____ # of Entrants @ \$25.00 each

Cash **Cash Enclosed:** _____ Check #s _____ **Check(s) Amount:** _____

Mail To:

Calvary Chapel Elk Grove
c/o Kathy Attardi
1918 B Heron Avenue
Schaumburg, IL 60193

Please make checks payable to: CALVARY CHAPEL

*(If registering by mail, please send
five (5) days prior to due date)*

Complete Info can be found at:
www.women.ccelkgrove.org/2023-pwc

Emergency Contact:*

Name: _____ Phone _____
 Emergency Contact