

UPWARD BOUND
Fort Lauderdale, Florida
May 5-8, 2008

REGISTRATION FORM

PLEASE PRINT CLEARLY

Full Name (with title): _____

Name as you wish it to appear on nametag: _____

Congregation Name & Town: _____

Mailing Address (indicate if home ___ or church ___): _____

Average Sunday Attendance: _____ Diocese: _____

Position/Role: _____

Phone: (Home) _____ (Office) _____

E-mail: _____

Web Site: _____

All-inclusive fee (conference tuition, 4 nights housing and 9 meals):

Registration \$695: _____

Commuter (no housing, 4 meals)\$350: _____

Guest dinner: \$40 _____

TOTAL: _____

Accessibility, Special needs, Dietary restrictions: _____

Registration ends **April 2, 2008**. Call to verify availability (800-334-7626, ext. 6003, or sobrien@episcopalchurch.org). Enrollment is contingent on availability and receipt of payment. Note cancellation policy. Issue check to **Domestic & Foreign Missionary Society**, mail with registration form to:

Episcopal Church Building Fund
Upward Bound Registration
815 Second Avenue
New York, NY 10017

FAX: 212-716-6267