

# 2018 National Workshop on Christian Unity Registration Form

Sheraton Hilton, Georgia Avenue, Silver Spring, Maryland

## LEIRN (Lutheran Ecumenical and Interreligious Representatives Network)

### I will attend:

- |  |   |                       |
|--|---|-----------------------|
| <input type="checkbox"/> <b>The Full Workshop</b>                        | Includes National Workshop registration fee, \$340 (*\$365 after 23 March), and LEIRN registration fee of \$45 per person, (required).                                | <b>\$385 / *\$410</b> |
| <input type="checkbox"/> <b>The Full Workshop (First Time Attendee)</b>  | Includes National Workshop registration fee, \$300 (*\$325 after 23 March), and LEIRN registration fee of \$45 per person, (required).                                | <b>\$345 / *\$370</b> |
| <input type="checkbox"/> <b>The Full Workshop (Student Registration)</b> | There is no additional fee for Students who attend the workshop. <i>Most ELCA Seminarians can attend at No Cost. Email Chris Olkiewicz, revcdo@gmail.com for info</i> | <b>\$100</b>          |
| <input type="checkbox"/> <b>One-Day Registration</b>                     | There is no additional fee for the those who attend the workshop.   | <b>\$100</b>          |
| <input type="checkbox"/> <b>Wednesday Dinner Banquet</b>                 | (included in Full Workshop Registration) additional fee for Student/One Day Registrations \$50 (*\$55 after 23 March) # of Tickets _____                              | <b>\$50 / *\$55</b>   |

Network fees are per person and cover network breakfast, information materials and other network expenses. Also, please note that each Network welcomes all to participate in their regular meetings and discussions, but for official Network matters, only appointed Network members can vote.

I am enclosing \$ \_\_\_\_\_ with this registration form, made payable to : NWCUC 2018

mail to : Attn: James Biegler, PO BOX 52, Ellison Bay, WI 54210-0052

### Attendee Information

Please print information as you would like it to appear in the Workshop Booklet.

Please check if you DO NOT wish to be listed in the Workshop Booklet.

\_\_\_\_\_  
Title Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Email

\_\_\_\_\_  
Cell phone

\_\_\_\_\_  
Home phone

\_\_\_\_\_  
Office phone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Please provide your name and role as you would like it to appear on your name badge:

\_\_\_\_\_  
Title and name for name badge

\_\_\_\_\_  
Role/position for name badge

Please check if you are:  Female  Male  Laity  Clergy  Student  Under 35

Are you the Ecumenical/Interreligious Officer / Conference Chair for your jurisdiction?  Yes  No

If you are not, please list his/her name and email below.

**Please don't forget hotel reservations**

**Ask for the special NWCUC rate!**

Sheraton Hotel, Georgia Ave,  
Silver Spring, MD ~ 844-489-2401 or  
visit [NWCUC.org/HotelReservations](http://NWCUC.org/HotelReservations)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone (if known)

### Network/Denomination Information

\_\_\_\_\_  
Diocese/Synod/Conference

\_\_\_\_\_  
Region

\_\_\_\_\_  
Church/Congregation/Organization

\_\_\_\_\_  
City/State

Do you have any special needs?  Yes  No Please include them on the reverse side of this registration form.

How many Workshops have you attended? \_\_\_\_\_ Will you be attending the closing brunch on Thursday?  Yes  No

Please indicate below the Seminar you plan to attend for each of the three scheduled seminar sessions:

#### Tuesday Offsite Excursion - select one

2:45pm-5pm

- Franciscan Monastery of the Holy Land In America
- Nat'l Museum of African Art
- Nat'l Museum of African-American History
- Nat'l Shrine/Basilica/Immac. Conception

#### Wednesday Afternoon Seminars

3:15-4:45pm

- Witness of Christians in the Middle East
- Canadian Council of Churches
- Healing Racial Conflict
- Conflict Resolution

#### Thursday Seminars

9am-10:30am

- Witness of Christians in the Middle East
- Canadian Council of Churches
- Healing Racial Conflict