

2019 National Workshop on Christian Unity Registration Form

St. Louis Hilton at the Ballpark, St. Louis, MO

LEIRN (Lutheran Ecumenical and Interreligious Representatives Network)

I will attend:

- | | | |
|--|---|-----------------------|
| <input type="checkbox"/> The Full Workshop | Includes National Workshop registration fee, \$350 (*\$375 after 7 March), and LEIRN registration fee of \$45 per person, (required). | \$395 / *\$420 |
| <input type="checkbox"/> The Full Workshop (First Time Attendee) | Includes National Workshop registration fee, \$300 (*\$325 after 7 March), and LEIRN registration fee of \$45 per person, (required). | \$345 / *\$370 |
| <input type="checkbox"/> The Full Workshop (Student Registration) | 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> | \$100 |
| <input type="checkbox"/> One-Day Registration | There is no additional fee for the those who attend the workshop. | \$100 |
| <input type="checkbox"/> Wednesday Dinner Banquet | (included in Full Workshop Registration) additional fee for Student/One Day Registrations \$50 (*\$55 after 7 March) # of Tickets _____ | \$50 / *\$55 |

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 : **NWCU 2019**
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 NWCU rate!
St. Louis Hilton at the Ballpark
St. Louis, MO ~ 314-421-1766 or
visit NWCU.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 Afternoon Seminars
select one
2pm | Wednesday Morning Seminars
select one
10am | Wednesday Afternoon Seminars
select one
3:30pm | Thursday Morning Seminar
8:30am |
| <input type="checkbox"/> S1 ~ Care for Creation | <input type="checkbox"/> S3 ~ Radical Hospitality | <input type="checkbox"/> S1 ~ Care for Creation | <input type="checkbox"/> S2 ~ Spirituality of Dialogue |
| <input type="checkbox"/> S2 ~ Spirituality of Dialogue | <input type="checkbox"/> S4 ~ Intl. Justice Mission | <input type="checkbox"/> S2 ~ Spirituality of Dialogue | |
| <input type="checkbox"/> S5 ~ Interreligious Dialogue | <input type="checkbox"/> S6 ~ How to Taizé | <input type="checkbox"/> S3 ~ Radical Hospitality | |
| <input type="checkbox"/> S7 ~ Christian Persecution | | <input type="checkbox"/> S4 ~ Intl. Justice Mission | |