

2020 National Workshop on Christian Unity Registration Form

The Whitehall Houston, Houston Texas

LEIRN (Lutheran Ecumenical and Interreligious Representatives Network)

I will attend:

- | | | |
|--|--|-----------------------|
| <input type="checkbox"/> The Full Workshop | Includes National Workshop registration fee, \$350 (*\$375 after 26 February), 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 26 February), 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 Seminar-ians can attend at No Cost. Email Mari Larson, pastormari@reformation-lutheran.org for info</i> | \$100 |
| <input type="checkbox"/> One-Day Registration | There is no additional fee for the those who attend the workshop. | \$100 |

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 : NWCUCU 2020
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 Directory

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

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 NWCUCU rate!**
The Whitehall Houston
Houston, TX ~ 713-739-8800 or
visit NWCUCU.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 Seminars A
select one
1:30pm | Tuesday Seminars B
select one
3pm | Wednesday Seminars A
select one
1:30pm | Wednesday Seminars B
select one
3pm |
|---|---|--|---|
| <input type="checkbox"/> Care for Creation | <input type="checkbox"/> Care for Creation | <input type="checkbox"/> Interfaith Hospitality | <input type="checkbox"/> Interfaith Hospitality |
| <input type="checkbox"/> Global Migration | <input type="checkbox"/> Episcopal Asylum Guide | <input type="checkbox"/> Hospitality - Moral Injury | <input type="checkbox"/> Hospitality - Moral Injury |
| <input type="checkbox"/> Hospitality - Moral Injury | <input type="checkbox"/> Global Migration | <input type="checkbox"/> Hospitality after Disaster | <input type="checkbox"/> Hospitality after Disaster |
| <input type="checkbox"/> Episcopal Asylum Guide | | <input type="checkbox"/> Biblical Imperative for Hospitality | <input type="checkbox"/> UMC/TEC Full Comm. |