

2024 National Workshop on Christian Unity Registration Form

Springhill Suites, Chicago, IL

Other Ecumenical Partners

I will attend:

- | | | |
|--|--|-----------------------|
| <input type="checkbox"/> The Full Workshop | Includes National Workshop registration fee, \$335 (*\$370 after 27 October), and Other Ecumenical Partners registration fee of \$35 per person, (required). | \$335 / *\$370 |
| <input type="checkbox"/> The Full Workshop (First Time Attendee) | Includes National Workshop registration fee, \$310 and Other Ecumenical Partners registration fee of \$35 per person, (required). | \$310 |
| <input type="checkbox"/> The Full Workshop (Student Registration) | There is no additional fee for Students who attend the workshop. | \$150 |
| <input type="checkbox"/> Seminarian Registration | There is no additional fee for the those who attend the workshop. | \$150 |

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 2024

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.

_____ Name _____

_____ Email _____

_____ Phone (if known) _____

Please don't forget hotel reservations

Ask for the special NWCUCU rate!

Sheraton Hotel, Georgia Ave,
Silver Spring, MD ~ 844-489-2401 or
visit NWCUCU.org/Hotel Reservations

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 Dinner on Wednesday ? Yes No

Please indicate below the Seminar(s) you plan to attend for each of the scheduled seminar sessions - Select One for each

Wednesday Interest Block One

Wednesday Interest Block Two

Local Tour of Houses of Worship

- Holyland Discussion
- Anniversary of Nicea
- Christian Nationalism
- Feast of Creation

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This tour will include a variety of Interreligious locations. Details are still being developed. The tour will not permit for time to attend Interest Blocks One or Two. There will be a nominal fee to cover transportation