## **2025** National Workshop on Christian Unity Registration Form *Springhill Suites, Chicago, IL*

## **UMEIT (United Methodist Ecumenical and Interreligious Training Network)**

I will attend:					
The Full Workshop	Includes Nationa and UMEIT regis	al Workshop registration fee, s stration fee of <b>\$25</b> per person.	6325 (*\$350 after 17 August),	\$325 / * \$350	
The Full Workshop (First Time Attendee)	Includes Nationa and UMEIT regi	al Workshop registration fee, stration fee of \$25 per person.	\$300 (*\$325 after 17 August),	\$300 /*\$325	
The Full Workshop (Student Registration)	There is no addit	tional fee for Students who att	end the workshop.	\$150	
Seminarian Registration	There is no additional fee for the those who attend the worksh			\$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: NWCU 2025					
mail to : Attn: James Biegler, PO BOX 2546, Appleton, WI 54912-2546					
Attendee Information		ase print information as you w Please check if you DO NOT			
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	ne 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/h			Please don't forget hote	l reservations	
Name			Ask for the special NWCU rate! Springhill Suites by Marriott		
Email		Phone (if known)	Phone (if known) 8101 W Higgins Rd, Chicago, Il 60631 visit NWCU.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					
Option 1		ion 1			
Option 2 Option 3	<b>—</b>	ion 2 ion 3			
Option 4		ion 4			