

chosen conference

Registration Form—Gaylord—Nov. 12 & 13, 2010

Church Name:	Contact Person:
Address:	
City, State, Zip:	
Church Phone:	Contact Phone:
Email:	

Deadline	Expires	Rate	Tour Pass
Early Bird	9/15/2010	\$25	\$35
4 Week	10/8/2010	\$33	\$43
1 Week	11/5/010	\$39	\$39
Final	11/13/2010	\$45	\$55

****Pastors and their wives attend free. Call for details: 989-370-1987**

No. of Tickets _____ X price _____ + \$5.00 Handling Fee = Total \$ _____
Method of Payment (check one): Check _____ MC _____ Visa _____
Name on Credit Card:
CC Number:
Expiration Date: _____ Code: _____
Signature:

Please complete this form and mail with your check or payment information to:

Rock Your World Ministries

P.O. Box 2100

Gaylord, MI 49734

Make Checks payable to Rock Your World Ministries

**There will be a \$30 fee for any returned checks.*