

REGENT BRIDGES SEMINAR III

A registration form must be submitted for each participant.

Pastor Rev. Dr. Mr. Ms.

Other _____

Name _____

Title _____

Church/Organization _____

Mailing Address* _____

City _____ **State** _____ **Zip** _____

This is my: Home address Church/Org address

*Please use your home address unless you are employed by your church/organization.

Phone _____

E-mail _____

Special Dietary/Disability _____

RELEASE

For promotional purposes, videos and photographs may be taken at the event. Your registration constitutes permission for Project Bridges to use your likeness in promotional materials and products.

REGISTRATION DEADLINE

Registrations should be received on or before Friday, November 3rd. If you are registering after this deadline, please call to verify that there is still space.

PAYMENT BY CHECK

Amount Enclosed \$ _____

Individual Registration:	Group Registration:
\$69.00/person*	(4+ people)
\$99.00/person	\$49.00/person*
	\$69.00/person

*For Members & Staff of Project Bridges Member Churches & Organizations

**Make all checks payable to Project Bridges. Mail payment and completed form(s) to: Project Bridges Seminar
3600 Brightseat Road, Landover, MD 20785**

PAYMENT BY CREDIT CARD ONLINE

www.ProjectBridges.org