

# 2009 Worldcast Convention Registration Form

Mail this registration form to:  
Worldcast Ministries  
PO Box 10653  
Yakima WA 98909-1653

OR FAX to:  
509-453-5549

OR call 509-248-5837 – If you receive the answering service, please leave the information listed below. Please speak slowly and spell any words that may be difficult to transcribe. Also, make sure you leave your telephone number should be need to contact you for additional information.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

NAMES OF ALL REGISTERING: (Please list both names of Married couple on one line and ages of infants needing nursery care)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

You can send a check or pay by Visa, MasterCard, or Discover

Name on card: \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

## **COST:**

Postmarked by Jun 22, 2009:

\$55 per Adult:	\$55 x # _____	= \$ _____
Married Couples:	\$100 x # _____	= \$ _____
\$25 ages 0-5	\$25 x # _____	= \$ _____

Postmarked after June 22, 2009:

\$65 per Adult:	\$65 x # _____	= \$ _____
Married Couples:	\$120 x # _____	= \$ _____
\$35 ages 0-5	\$35 x # _____	= \$ _____

TOTAL ENCLOSED (US Funds) = \$ \_\_\_\_\_