



## REGISTRATION FORM

Lutheran Women's Missionary League Eastern District

**40th Biennial Convention--June 14-16, 2024**

DoubleTree by Hilton

910 Sheraton Drive, Mars, PA 16046

**FOR LODGING RESERVATIONS phone 1-855-610-8733**

**NO LODGING RESERVATIONS WILL BE MADE BY THE CONVENTION COMMITTEE**

Name: \_\_\_\_\_ LWML Zone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Home Church: \_\_\_\_\_  
 City: \_\_\_\_\_ Church City & Zip: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_ Your Phone (home or cell): \_\_\_\_\_  
 Email: \_\_\_\_\_

I will be serving as: (please circle all that apply)

\_\_\_\_\_ Check if you are a First-timer

Delegate

Alternate Delegate

Clergy

Exhibitor

Choir

Guest

Speaker/Special Guest

Young Woman Representative

Convention Committee

Board of Directors

### REGISTRATION (Deadline: APRIL 24, 2024)

**\$45.00 Registration Fee** (required for all registrations).

\$

**\$55.00 Late Fee** (ADDITIONAL fee for all registrations received after APRIL 24, 2024).

\$

**No Registrations will be honored after MAY 15, 2024.**

**Total due for registration**

\$

### MEALS & HOSPITALITY

Please note special dietary needs on p. 2.

Meal Prices (includes gratuity)

_____ Friday Dinner Buffet	\$38	Meal prices reflect a generous donation from Concordia Lutheran Ministries.	\$
_____ Saturday Breakfast	\$22		\$
_____ Saturday Lunch	\$34		\$
_____ Saturday Banquet & Entertainment	\$46		\$
_____ Sunday Breakfast	\$27		\$

**Total due for meals**

\$

**Total due for registration and meals**

\$

**LESS** amount paid by District (YWR/Speaker/Board only)

\$ ( )

**GRAND TOTAL DUE**

\$

**Make checks payable to: LWML Eastern District Convention**

**\*MAIL completed REGISTRATION FORM and FULL PAYMENT to:**

**Darlene Garcia, 105 Entwood Lane, Butler, Pa 16002**

**Phone (724) 841-7697**

**CIRCLE YOUR PREFERENCE FOR RECEIVING A CONFIRMATION NOTICE: EMAIL OR MAIL**

If you select **mail**, please include a self-addressed, stamped, business-sized envelope with your payment & registration.

Registration Chairman only: #

Date received:

Check(s): Amount:

		<p align="center"><b>REGISTRATION FORM</b></p> <p align="center">Lutheran Women's Missionary League Eastern District</p> <p align="center"><b>40th Biennial Convention--June 14-16, 2024</b></p> <p align="center">DoubleTree by Hilton</p> <p align="center">910 Sheraton Drive, Mars, PA 16046</p> <p align="center"><b>FOR LODGING RESERVATIONS phone 1-855-610-8733</b></p> <p align="center"><b>NO LODGING RESERVATIONS WILL BE MADE BY THE CONVENTION COMMITTEE</b></p>	
<b>ON YOUR OWN LEISURE</b>		At the DoubleTree: Indoor and outdoor pools and a fitness center. See the list of restaurants and shops, as well as interesting sights, museums and tour companies in your packet.	
<b>MITE WALK</b>		<input type="checkbox"/> Yes! I would like to participate in the Mite Walk. (Details about the Mite Walk will be included with your registration confirmation.)	
<b>SERVANT EVENTS</b>		Both events are for residents of Concordia Lutheran Ministries. <input type="checkbox"/> Yes! Tying lap blankets <input type="checkbox"/> Yes! Making small table favors	
<b>CHOIR</b>		<input type="checkbox"/> Yes! I would like to sing in the choir on Friday. I sing: <input type="checkbox"/> SOPRANO <input type="checkbox"/> ALTO	
<b>SPECIAL INTEREST SESSIONS</b> (Select one)		<input type="checkbox"/> Session I Brenda Piester, National LWML Representative <input type="checkbox"/> Session II Heidi Goehmann (futher details coming in Spring 2024) <input type="checkbox"/> Session III Bev Wicher-Visual Faith Prayer Practices-Connecting Hearts and Minds to Jesus	
<b>PASTORS' EVENT</b> (for Pastors only)		<input type="checkbox"/> "Doctrinal Review"--Led by Rev. Carl Emberger	
<b>SPECIAL NEEDS</b>		We would like you to be as comfortable as possible during your convention experience and hotel stay. <b>Please indicate below any special needs by selecting the appropriate category:</b>	
	Medical Condition(s) the convention committee should be aware of:		
	Dietary Needs (such as food allergy, vegetarian, etc.). Specify:		
	Handicapped accessible room:		
	Interpreter needed for (circle one):    Hearing Impaired       Spanish Language       Other:		
	OTHER:		
<b>TRANSPORTATION</b>		If you require transportation between an airport, train, or bus station and the convention, <b>please indicate below your ARRIVAL &amp; DEPARTURE information.</b> Transportation details will be sent to you.	
<b>AIRLINE INFORMATION</b>		<b>BUS / TRAIN INFORMATION</b>	
Airport:		Station:	
Airline:	Departure Date:	Bus Company/Train Company:	
Arrival Date:	Airline:	Arrival Date:	Departure Date:
Flight Number:	Flight Number:	Bus/Train #:	Bus/Train #:
Arrival Time:	Departure Time:	Arrival Time:	Departure Time:
<b>PHOTOGRAPHY RELEASE</b>			
Photographs will be taken by our convention photographer throughout the convention. I hereby give the LWML Eastern District the absolute right and permission to use my photographed likeness/image in its future publications. I understand that the photograph(s) may be used in publications, direct-mail pieces, or electronic media (e.g., video, CD-ROM, internet/WWW). I release the LWML, LWML Eastern District, the photographer, their offices, employees, agents, volunteers, and designees from liability for and violation of personal or proprietary rights I may hold in connection with such use.			
_____		_____	
Signature		Date	