

# FWCC ANNUAL MEETING ◇ April 3-6, 2008 ◇ Morgantown, Indiana

Registration Deadline – March 10, 2008

Cancellation Policy: Any cancellation received after March 24<sup>th</sup>, 2008 will result in a \$100 cancellation fee

ONLINE REGISTRATION AVAILABLE AT [www.fwccamericas.org](http://www.fwccamericas.org)

## PERSONAL INFORMATION (one form per person)

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Daytime phone: ( ) \_\_\_\_\_

E-mail \_\_\_\_\_

Yearly Meeting \_\_\_\_\_

Person to notify in case of emergency:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

## TRAVEL PLANS

*I will arrive in Indiana by:*

car  air  train  bus

*If driving:*

Approximate arrival time/date \_\_\_\_\_

*Train* arriving at Indianapolis Station/AMTRAK or

*Bus* arriving at Indianapolis Bus Terminal

Arrival date/time \_\_\_\_\_

Departure date/time \_\_\_\_\_

## Flight Arrival Information

Arrival Date \_\_\_\_\_ Time \_\_\_\_\_

Airline Name \_\_\_\_\_

Flight # \_\_\_\_\_ Airport \_\_\_\_\_

## Flight Departure Information

Departure Date \_\_\_\_\_ Time \_\_\_\_\_

Airline Name \_\_\_\_\_

Flight # \_\_\_\_\_ Airport \_\_\_\_\_

## SPECIAL NEEDS

I have the following special needs:

Dietary:  Vegetarian  Vegan

Other, please specify: \_\_\_\_\_

Allergies \_\_\_\_\_

Anything else we should know \_\_\_\_\_

## OTHER INFORMATION

This is my first Annual Meeting:  Yes  No

\_\_\_\_\_ I am willing to volunteer at Annual Meeting by helping out as needed.

I wish to reserve display space (no charge)

half table  whole table

Name of organization \_\_\_\_\_

## Documents in advance

Do not mail them, I will get them off FWCC website

Please send me a hard copy of all documents

## Are you able to

Speak Spanish? \_\_\_\_\_ Level of proficiency \_\_\_\_\_

Read/write Spanish? \_\_\_\_\_ Level \_\_\_\_\_

Do you have interpreting and/or translation skills? \_\_\_\_\_

\_\_\_\_\_ Please assign me to a Spanish-language worship group. *Note: no interpretation provided.*

## WORSHIP AT ANNUAL MEETING

Can you suggest the name of a Friend(s) planning to attend annual meeting who you recommend as a leader of a small worship group? Name(s) \_\_\_\_\_

## PAYMENT INFORMATION

Make checks payable to: **2008 FWCC Annual Meeting**

Mail to: **The Conference Managers, TCM**

**P.O. Box 7276**

**Bismarck, ND 58507-7276**

Phone/Fax: 1-888-310-8900

E-mail: **ConfMgrs@aol.com**

## BOOKING YOUR TRAVEL

Please plan to fly into the **Indianapolis International Airport (IND)**.

FWCC uses Ridgeway Travel in Lancaster, PA for booking some of our flights, and have found them very helpful. You can reach them at (800) 233-0032 from within the US; (717) 393-7000 from outside the US; fax (717) 394-7408 Email: [ridgeway@ridgeway.com](mailto:ridgeway@ridgeway.com).

Amtrak Rail's Indianapolis Station is located in downtown Indianapolis. Greyhound bus lines also provide service to Indianapolis and share the terminal with Amtrak. Arrangements are in process to facilitate transportation to the conference site for those arriving by train or bus.

## EXCURSION INTEREST

I am interested in participating in these excursions prior to or after the Annual Meeting: (see information sheet for details)

\_\_\_\_\_ ESR Willson Lectures

\_\_\_\_\_ Friends Historical tour in Southern Indiana

\_\_\_\_\_ Greenfire Farm sustainable community

\_\_\_\_\_ Self guided tours in the area

Name: \_\_\_\_\_

**REGISTRATION FORM FWCC Section of the Americas**

**ANNUAL MEETING 2008**

**Morgantown IN**

Please use one form per person

**April 3-6, 2008**

**Step 1: LODGING AND MEALS - Select rooming options and number of nights**

Note: rates are PER PERSON, In US Dollars.

**Option 1: Conference Center.** Two people per room with two twin beds, private bath. All meals. Linens included.

Select nights:

Tuesday \$60     Wednesday \$60     Thursday \$60     Friday \$80     Saturday \$80     Sunday \$80

Total nights \_\_\_\_\_ Total \$ \_\_\_\_\_

\_\_\_\_ Please assign me a roommate

\_\_\_\_ I will share my room with \_\_\_\_\_ (confirm before listing name)

**Single rooms available only in Conference Center.** *Single room availability is limited*

Select nights:

Tuesday \$80     Wednesday \$80     Thursday \$80     Friday \$100     Saturday \$100     Sunday \$80

Total nights \_\_\_\_\_ Total \$ \_\_\_\_\_

**Subtotal \$ \_\_\_\_\_**

**Option 2: Main House/Sleeping Wing** Multiple-bed rooms for 4-6 people each. Twin beds. Shared bathrooms. All meals. Bring your own linens, or rent linens.

Select nights:

Tuesday \$46     Wednesday \$46     Thursday \$46     Friday \$66     Saturday \$66     Sunday \$46

Total nights \_\_\_\_\_ Total \$ \_\_\_\_\_

\_\_\_\_ Please assign my roommates

\_\_\_\_ I will share my room with \_\_\_\_\_  
\_\_\_\_\_ (list as many names as you wish, up to 5; confirm before listing names)

\_\_\_\_ I will bring my own linens (twin sheets, pillow, blanket, towels)

\_\_\_\_ I wish to rent linens @ \$13.00 total

**Subtotal \$ \_\_\_\_\_**

**Option 3: Cabins** Each cabin holds 5 twin bunk beds. Only 5 people will be assigned per cabin unless you indicate that you are willing to use a top bunk. Separate bathroom/shower facility for cabins, located outside but very close to cabins. All meals. Bring your own linens or rent linens.

Select nights:

Tuesday \$25     Wednesday \$25     Thursday \$25     Friday \$35     Saturday \$35     Sunday \$25

\_\_\_\_ Please assign my roommates

\_\_\_\_ I will share my room with \_\_\_\_\_  
\_\_\_\_\_ (list as many names as you wish, up to 4; confirm before listing names)

\_\_\_\_ I will bring my own linens (twin sheets, pillow, blanket, towels)

\_\_\_\_ I wish to rent linens @ \$13.00 total

\_\_\_\_ I am willing to sleep in a top bunk

**Subtotal \$ \_\_\_\_\_**

## Step 2: CONFERENCE FEE

Fee to participate in the conference, per person before March 10 <sup>th</sup>	\$ 100
Fee if paid after March 10 <sup>th</sup>	\$ 130

Subtotal \$ \_\_\_\_\_

## Step 3: BUS TRANSPORTATION

Round trip between Indianapolis Airport and Waycross Camp

Round trip cost \$30 per person

\_\_\_ I need transportation. Please sign me up. I will provide my flight information no later than March 24<sup>th</sup>.

\_\_\_ I do not need FWCC to provide transportation for me between the airport and Waycross Camp

Subtotal \$ \_\_\_\_\_

## Step 4: CALCULATE COSTS OF ROOM & MEALS & CONFERENCE

Step 1 - Package price \$ \_\_\_\_\_

Linen rental \$ \_\_\_\_\_

Step 2 – Conference cost \$ \_\_\_\_\_

Step 3 – transportation between airport and meeting \$ \_\_\_\_\_

Freewill contribution to support travel for Latin American reps to annual meeting \$ \_\_\_\_\_

**Total Cost:** \$ \_\_\_\_\_

## Step 4: PAYMENT INFORMATION

Select Payment option:

Check Amount: \$ \_\_\_\_\_

Credit Card Please charge my credit card this amount: \$ \_\_\_\_\_

\_\_\_ Visa \_\_\_ Mastercard

Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature \_\_\_\_\_

**Cancellation Policy: All cancellations must be confirmed in writing. A \$100 fee will be charged if you cancel after March 24<sup>th</sup>, 2008.**

## DAY PARTICIPANTS

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Commuter rates

*Waycross Camp charges a fee for all who come to the camp, regardless of length of stay.*

### Step 1: MEALS

**Full or partial day; three meals included**

Select days:

Wednesday \$25     Thursday \$25     Friday \$35     Saturday \$35     Sunday \$25

Total days \_\_\_\_\_ total cost \$ \_\_\_\_\_

**Subtotal \$ \_\_\_\_\_**

### Step 2: CONFERENCE COST

Registration for the full event (Thursday – Sunday) \$ 100

Registration per day \$ 30

\_\_\_ Thursday \_\_\_ Friday \_\_\_ Saturday

**Subtotal \$ \_\_\_\_\_**

### Step 3: CALCULATE COSTS OF MEALS & CONFERENCE

Step 1 – Meals \$ \_\_\_\_\_

Step 2 – Conference cost \$ \_\_\_\_\_

Freewill contribution to support travel for Latin American reps to annual meeting \$ \_\_\_\_\_

**Total Cost: \$ \_\_\_\_\_**

### Step 4: PAYMENT INFORMATION

Select Payment option:

Check Amount: \$ \_\_\_\_\_

Credit Card Please charge my credit card this amount: \$ \_\_\_\_\_

\_\_\_ Visa \_\_\_ Mastercard

Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature \_\_\_\_\_