

CONFERENCE REGISTRATION FORM

NAME: _____ PHONE _____

ADDRESS: _____ CITY/ STATE: _____ ZIP: _____

LIGHTHOUSE: _____ EMAIL: _____

REGISTRATION ENCLOSED:

_____ \$40 Single Registration includes Lunch _____ \$70 Married Couples _____ \$20 Generations (Ages 12–25)

Make check or money order payable to: Heart of Texas Area Aglow or Register online at: www.hotareaaglow.org
(NOTE: Registrations are transferable but not refundable)

Check # _____ Amount Enclosed: _____

Mail payments and form to Sylvia Schaefer, 6015 B. W. Adams, Temple, TX 76502
Phone: Cell: 254-541-1303
For additional information email hotareateam@gmail.com