

Adventist Association

Equipping Churches for Effective Health Ministry

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Registration for CHIP Leadership Training Workshop Modesto, California - February 21-24, 2008

Church: _____ Conference _____

City/State: _____ Phone: _____

Pastor: _____ Phone: _____

Names of Persons Attending Workshop: (#1 is principal contact person)

1. _____ Phone: _____

Mailing Address: _____ City: _____ State: _____ Zip code: _____

Email Contact Address: _____

2 _____ Phone: _____ Email: _____

3 _____ Phone: _____ Email: _____

Because of possible space constraints, each church is limited to sending a maximum of three persons until after February 1 when additional names may be added @ \$50/person *on a space available basis*.

Workshop Registration Fee/Church Team: (fee includes up to 3 persons attending per church)

***Early Bird Rate by February 1— \$250/church ***Regular Rate after February 1—\$300/church

Housing: For a list of area motels & hotels, go to: www.adventistchip.org/modesto_motels.pdf

Prepaid meals: The number of meal tickets needed for each meal by our church team is noted below and the payment is included in the enclosed check or credit card payment.

____ Thu Supper \$8 ____ Fri Lunch \$8 ____ Fri Supper \$8 ____ Sab Lunch \$8 ____ Sab Supper \$8

Please mail this form with check or credit card information to the address below. For questions about the form/process, or for a form you can email, call 423-638-7804 or e-mail westpeggy@comcast.net.

Today's Date _____

Payment for: Registration fee of \$ _____ + meals \$ _____ (# of meals x \$8) = **Total \$** _____

Check payable to: **Adventist CHIP Association** – Earlybird fee must be postmarked by February 1, 2008

Credit Card for \$ _____ VISA Master Card

If submitting application by email: DO NOT INCLUDE YOUR CREDIT CARD NUMBER AS IT WILL NOT BE SECURE. CALL 423-638-7804 OR FAX IT TO 423-638-3192

Credit Card #: _____ Card Expires: Month _____ Year _____

Name as it appears on Card: _____ Signature: _____

By submitting this application by e-mail, you agree to have the amount listed charged to your credit card. Yes

Adventist CHIP Association
247 Peach Orchard Road – Greeneville, TN 37745

Coronary Health Improvement Project (CHIP)

For Additional Information: Call toll free 1-866-732-2447 or [Email: info@adventistchip.org](mailto:info@adventistchip.org)