

# SOMO District LINC Conference

## REGISTRATION FORM

Radiant Life Church – Festus, Missouri  
March 9th & 10th

### Group Leader Information/Individual Registration

|                 |           |            |
|-----------------|-----------|------------|
| First Name      | Last Name | Home Phone |
| E-mail Address: |           | Church:    |

|   |  |
|---|--|
| <b>Conference Registration</b> (please check one)<br><br><input type="checkbox"/> Early Registration \$25 - Must register before Feb 28th<br><input type="checkbox"/> Group Rate - for every 5 Registered 1 Free. (The group rate is only available during Early Registration & must be paid on one check.)<br><input type="checkbox"/> Registration \$35 - Any registration after Feb 28th | <b>Additional Lunches For Conference:</b><br><br>Lunch is provided for paid attendees but additional lunches may be purchased for guests or children for \$8 each.<br><br># of Extra Lunches _____ x \$8 = _____ |
| <b>Total Amount</b> \$  |  |

### Group Registration (If registering more than 1 person fill out the top with the group leaders information and then complete this section.)

| #             | First Name | Last Name | Phone # | Reg Cost | Total Due |
|---------------|------------|-----------|---------|----------|-----------|
| 1             |            |           |         |          |           |
| 2             |            |           |         |          |           |
| 3             |            |           |         |          |           |
| 4             |            |           |         |          |           |
| 5             |            |           |         |          |           |
| 6             |            |           |         | FREE     |           |
| <b>TOTAL:</b> |            |           |         |          |           |

### Payment Information \*Please note that all registrations are nonrefundable.\* \* Make Checks Payable to PCG SOMO LINC \*

|  |             |                          |                      |
|--|-------------|--------------------------|----------------------|
| <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card        |             |                          |                      |
| Credit Card Information (please note there will be a 3% credit card processing fee added to your amount) |             |                          |                      |
| Name on Card   | Card Number | Billing Address Zip Code | CVC Number           |
| Billing Address:   |             |                          | EXP Date:<br>(MM/YY) |

All Conference Events Will Be Held At

**Radiant Life Church**  
11533 Gamel Cemetery Rd  
Festus, MO 63028

Registration Forms Must Be Mailed To:

**LINC Conference**  
11533 Gamel Cemetery Rd.  
Festus, MO 63028  
Tel: (636)937-0800