

Michigan Mission Center Fall Conference

A Future of Hope

Friday, November 4, 2016

Registration	7:00 pm - 9:00 pm
Gathering Worship	7:30 pm
Meet & Greet	8:00 pm

Saturday, November 5, 2016

Registration	7:30 am - 8:45 am
Morning Business Meeting*	9:00 am - 12:00 pm
Lunch (on your own)	12:00 pm - 1:30 pm
Afternoon Business Meeting*	1:30 pm - 5:00 pm
Evening Meal (on your own)	5:00 pm - 7:00 pm
Worship (Ordinations)*	7:00 pm

Sunday, November 6, 2016

Chats w/Leadership*	8:45 am - 9:45 am
Classes*	9:45 am - 10:45 am
Commissioning Worship	11:00 am - 12:00 pm
Nursery & Children's Classes	8:45 am - 10:45 am

*Nursery and Children's activities available

Saginaw Valley State University - Curtiss Building 7400 Bay Road, University Center, MI 48710

Due to the costs for accommodations, as well as programming and conference materials, conference fees are as follows:

\$20 before October 30th * \$30 after October 30th

There will be no fee if this is your first time attending a Michigan Mission Center Conference.

- No charge for children through 5th grade.
- Payment due prior to conference. Registration is complete only upon receipt of your payment.
- Nursery & Children's activities (K-5th Grade) available Saturday and Sunday.

Group rates for Community of Christ are available at the following hotels:

Four Points by Sheraton 989.790.5050

Two Queen Standard for \$104 plus tax * King Standard for \$99 plus tax

Comfort Suites 989.797.8000 King size bed for 89.99 plus tax

Sanford Campground 989.429.7049

RV site for \$16 per night * Tent site for \$11 per night

Name

Address

Email Phone

Congregation

Are you a delegate? Yes No

First time attendee? Yes No

How would you like your materials? Printed Electronic

Name

Address

Email Phone

Congregation

Are you a delegate? Yes No

First time attendee? Yes No

How would you like your materials? Printed Electronic

Children under 5th grade:

Name	Age	Grade
Name	Age	Grade
Name	Age	Grade
Name	Age	Grade

I hereby give consent to and authorize the taking of photographs or videotape in which my child may appear. I hereby waive all right of privacy in and to any said pictures or tapes.

Parent/Guardian Signature: _____

Please make checks payable to Community of Christ

Please return the bottom half of the registration form to:

Michigan Mission Center Office
223 S. Washington St., Charlotte MI 48813
or register at www.cofchristmi.org/fall-conference