

2010 Disciples Women ~ Quadrennial Assembly

Register online at www.Quadrennial.org and receive your hotel booking code immediately!

Or return this form along with your payment to:
2010 Quadrennial Assembly ~ P.O. Box 1986 ~ Indianapolis, IN 46206-1986

SHADED AREAS MUST BE COMPLETED

Please **PRINT CLEARLY** or Type

1. First Name		2. M.I.	3. Last Name	
4. Street Address/P.O./Apt.#				
5. City/Town			6. State/Province	
7. Zip/Postal Code	8. Country		9. Email Address	
10. Home Phone		11. Mobile/Alternate Phone		12. Gender _____ Female _____ Male
13. Emergency Contact Name			14. Emergency Contact Phone Number	
15. Church Affiliation <input type="checkbox"/> I am a Disciple <input type="checkbox"/> I am attending as a friend of a Disciple <input type="checkbox"/> This is my first time attending QA <input type="checkbox"/> Of the previous 13 QA's (including Mix in '06), I have attended _____ events <input type="checkbox"/> Disciples of Christ Region: _____				
16. Church Name		17. Church City/Town		18. Church State/Province
19. Racial Ethnic Background (✓ all that apply) <input type="checkbox"/> African American/Black <input type="checkbox"/> Asian American/Pacific Islander <input type="checkbox"/> European American/Caucasian <input type="checkbox"/> Hispanic/Latina(o) <input type="checkbox"/> Native American <input type="checkbox"/> Biracial/Multiracial <input type="checkbox"/> Other: _____			21. Special Needs (✓ all that apply) <input type="checkbox"/> Language Translation: <input type="checkbox"/> Spanish <input type="checkbox"/> French <input type="checkbox"/> Korean <input type="checkbox"/> American Sign Language <input type="checkbox"/> Large Print Plenary/Worship Book <input type="checkbox"/> Spanish Plenary/Worship Book <input type="checkbox"/> Service animal accommodations <input type="checkbox"/> Electric Scooter – <i>Check here to reserve a scooter.</i> <i>There is an additional fee for renting scooters.</i> <input type="checkbox"/> Physical restriction that requires assistance <input type="checkbox"/> Will you be requesting an ADA hotel room? <i>If you have checked any special needs, you will be contacted by a member of the hospitality team.</i>	
20. Age Group <input type="checkbox"/> 12 – 18 <input type="checkbox"/> 60 – 74 <input type="checkbox"/> 19 – 29 <input type="checkbox"/> 75+ <input type="checkbox"/> 30 – 44 <input type="checkbox"/> 45 – 59				
22. Please ✓ check all that apply <input type="checkbox"/> International Representative <input type="checkbox"/> Parish Nurse <input type="checkbox"/> Clergy (Licensed or Ordained) <input type="checkbox"/> Ecumenical Representative <input type="checkbox"/> Workshop/Forum Leader or Keynoter <input type="checkbox"/> Seminary Student <input type="checkbox"/> Christian Educator <input type="checkbox"/> Exhibitor				
23. Volunteer Opportunities: (Please ✓ check all areas where you are willing to work.) <input type="checkbox"/> Dining Room Hostess <input type="checkbox"/> Check-in Hostess <input type="checkbox"/> Information Services <input type="checkbox"/> Transportation and Logistics <input type="checkbox"/> "Wake Up Call" reporter or photographer/videographer <input type="checkbox"/> Workshop/Forum Hostess <input type="checkbox"/> Usher <input type="checkbox"/> Wherever Needed <input type="checkbox"/> Registration <input type="checkbox"/> Chaplain <input type="checkbox"/> Fluent Language Speaker/Translator: <input type="checkbox"/> Spanish <input type="checkbox"/> French <input type="checkbox"/> Korean <input type="checkbox"/> American Sign Language				

INFORMATION ABOUT OPTIONAL CHOICES ON THE NEXT PAGE:

Tweeners & Husbands – You can register your Tweeners (ages 12 – 17) and Husband to join you at QA for free! Special outings are being planned that you will pay for on-site in a pay as you go format.

Children's Program – For children ages 6 months to 11 years old - an additional fee is required. The cost is \$150 for the first child and \$125 for each additional child in the same household. The program will run Thursday through Saturday (June 24 – 26) from 8:00 a.m. to 6:00 p.m. Lunch and snacks are included; however, evening child care is not available. **The deadline for Children's Program registration is April 1, 2010.**

Transportation Package – A transportation package is offered at \$20 per person which includes roundtrip transportation from the airport to the Sheraton on Wednesday from 9:00 a.m. – 9:00 p.m. and on Sunday from the Sheraton to the airport from 8:30 a.m. – 6:00 p.m. It is approximately \$20 one way to take a taxi to the hotel. This package offers you a 50% savings.

Meal Package – A meal package is offered at \$75 per person which includes 6 plated meals (lunch & dinner) on Thursday, Friday and Saturday. Breakfasts are not included. Vegetarian meals are available upon request on the next page.

Habitat for Humanity Pre-Event Build – This event will take place before QA starts and is \$75 per person. This package includes meals (from Sunday dinner through Wednesday lunch), transportation, and housing at a local church. Alternatively, housing at the hotel is available for \$122 per room/per night. You must be at least 18 years of age to participate. Additional information will be mailed to those who register for the build.

Once you register, information packets with everything you need to know about the event will be mailed in early spring of 2010. Hotel room booking codes will be sent to you after your registration has been received and entered.

FOR OFFICE USE ONLY:	RCVD:	PAYMENT:
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Help us save costs by registering online at www.Quadrennial.org or return this form along with your payment to:
2010 Quadrennial Assembly ~ P.O. Box 1986 ~ Indianapolis, IN 46206-1986

REGISTER YOURSELF: (√ Check only one)

FULL REGISTRATION

- \$375 Early Registration – postmarked by March 31, 2010
- \$400 Registration – postmarked after April 1, 2010

ONE DAY REGISTRATION: \$125 √ check only one day:

- Thursday Friday Saturday
- *Days may not be combined.*

WORKSHOP REGISTRATION – Please see the workshop schedule for full class descriptions and session codes. **Please enter the SESSION CODES ONLY in the boxes below by entering your 1st, 2nd and 3rd preference for each session.**

	Thurs. 6/24 Session 1A	Thurs. 6/24 Session 1B	Fri. 6/25 Session 2A	Fri. 6/25 Session 2B	Sat. 6/26 Session 3A
1 st Choice					
2 nd Choice					
3 rd Choice					

USE THIS AREA TO ENTER YOUR OPTIONS AND BRING FAMILY MEMBERS WITH YOU:

ATTENDEE INFORMATION		WHO ARE YOU REGISTERING? (One person per line)				WHAT OPTIONS WOULD YOU LIKE TO ADD? Select all that apply. See descriptions on the previous page.				GRAND TOTAL
Name for Badge (Print Clearly)	Age (If 18 or under)	Myself	Husband	Tweeners 12-17 yrs	Child 6 mo – 11 yrs	Transportation Package	Meal Packages (Select Meal Preference)		Habitat Build	
							Regular	Vegetarian		
		<input checked="" type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Quantity:		1								
Price Per Person:		See above	Free	Free	\$150/1st Child \$125/each additional	\$20 Per Person	\$75 Per Person	\$75 Per Person	\$75 Per Person	
Total Amount:		\$	\$ 0	\$ 0	\$	\$	\$	\$	\$	

PAYMENT INFORMATION ~ SORRY, BUT WE CANNOT ACCEPT CASH.

- Visa
- MasterCard
- Discover
- Check or Money Order – made payable to: **2010 Quadrennial Assembly**

Enter Grand Total from worksheet above:	\$
Would you like to make a scholarship donation?	\$
TOTAL AMOUNT DUE:	\$

Credit Card Number _____ - _____ - _____ - _____ Exp. ____/____ 3 Digit Security Code: _____
 Month Year (On the back of the card)

Name as it appears on credit card _____

Billing address of the card holder _____

Phone number of card holder _____

Authorized signature _____

(Signature required for all mail-in registrations)

To obtain a **SCHOLARSHIP APPLICATION** visit www.quadrennial.org or send a written request to: 2010 Quadrennial Assembly Scholarship Fund
 P.O. Box 1986 ~ Indianapolis, IN 46206-1986 ~ **All scholarship applications must be received by January 31, 2010**

REFUND POLICY:

- Before April 30, 2010 – Full refund less \$25 processing fee.
- After April 30, 2010 – No refund unless a new registration accompanies the cancellation by June 15, 2010.
- Returned Check Fee: \$25