

# PASTORS/WIVES FELLOWSHIP DAY REGISTRATION

Send this form with your payment (\$25 per person) to Executive Events, Bob Jones University, Greenville, SC 29614.

Dr.  Rev.  Mr. \_\_\_\_\_  
First Middle Last Nickname

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_  
Nickname

Home address \_\_\_\_\_  
Street City State Zip

Church \_\_\_\_\_  
Position

Church address \_\_\_\_\_  
Street City State Zip

Church phone \_\_\_\_\_  
Home phone

Pastor's e-mail address \_\_\_\_\_  
Wife's e-mail address

Fellowship Day City \_\_\_\_\_

## PAYMENT INFORMATION

Check  Visa  MasterCard  Discover Card # \_\_\_\_\_ Expiration date \_\_\_\_\_

Signature of cardholder\* \_\_\_\_\_

\*Not necessary to sign if returning RSVP by e-mail.

## ADDITIONAL ATTENDEES

**Please list below any pastors and their wives that you plan to bring.** If additional space is needed, feel free to photocopy this registration form.

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_  
Position

Church address \_\_\_\_\_

Church phone \_\_\_\_\_  
Home phone

Pastor's e-mail address \_\_\_\_\_  
Wife's e-mail address

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_  
Position

Church address \_\_\_\_\_

Church phone \_\_\_\_\_  
Home phone

Pastor's e-mail address \_\_\_\_\_  
Wife's e-mail address

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_  
Position

Church address \_\_\_\_\_

Church phone \_\_\_\_\_  
Home phone

Pastor's e-mail address \_\_\_\_\_  
Wife's e-mail address

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_  
Position

Church address \_\_\_\_\_

Church phone \_\_\_\_\_  
Home phone

Pastor's e-mail address \_\_\_\_\_  
Wife's e-mail address

REGISTRATION (CONTINUED FROM OTHER SIDE)

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_ Position \_\_\_\_\_

Church address \_\_\_\_\_

Church phone \_\_\_\_\_ Home phone \_\_\_\_\_

Pastor's e-mail address \_\_\_\_\_ Wife's e-mail address \_\_\_\_\_

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_ Position \_\_\_\_\_

Church address \_\_\_\_\_

Church phone \_\_\_\_\_ Home phone \_\_\_\_\_

Pastor's e-mail address \_\_\_\_\_ Wife's e-mail address \_\_\_\_\_

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_ Position \_\_\_\_\_

Church address \_\_\_\_\_

Church phone \_\_\_\_\_ Home phone \_\_\_\_\_

Pastor's e-mail address \_\_\_\_\_ Wife's e-mail address \_\_\_\_\_

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_ Position \_\_\_\_\_

Church address \_\_\_\_\_

Church phone \_\_\_\_\_ Home phone \_\_\_\_\_

Pastor's e-mail address \_\_\_\_\_ Wife's e-mail address \_\_\_\_\_

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_ Position \_\_\_\_\_

Church address \_\_\_\_\_

Church phone \_\_\_\_\_ Home phone \_\_\_\_\_

Pastor's e-mail address \_\_\_\_\_ Wife's e-mail address \_\_\_\_\_

Dr.  Rev.  Mr. \_\_\_\_\_

Will your wife be attending?  Yes  No Wife's name, if attending \_\_\_\_\_

Home address \_\_\_\_\_

Church \_\_\_\_\_ Position \_\_\_\_\_

Church address \_\_\_\_\_

Church phone \_\_\_\_\_ Home phone \_\_\_\_\_

Pastor's e-mail address \_\_\_\_\_ Wife's e-mail address \_\_\_\_\_

**OFFICE USE ONLY**

PAID \$

PT

VP

Men

Women