



Registration

Name (s) of Attendee (s) _____

If applicable, list name(s) of additional attendee(s) below, including any children (and their ages) who will be participating in our infant-5th grade childcare.

Email _____

Address _____

City _____ State _____ Zip _____

Home Church _____

Conference Registration Fee:

___ Individual \$50 ___ Couple \$80 ___ Family \$100

___ Members of churches that donate \$400 to the Michigan Christian Convention - **FREE**

___ Student with college ID - **FREE**

Saturday Lunch

\$10/person x ___ = \$ _____

Total payment enclosed for registration and lunch: \$ _____

Mail your registration and payment to:

**MCC Registration,
6202 W. Willow Highway,
Lansing, MI 48917**

Registrations are transferable but not refundable.

You may print additional forms or register online at www.michiganchristianconvention.org