

The First Baptist Church of Hillside Sisters In Spirit Ministry Conference Friday, April 27, 2012 to Saturday, April 28, 2012

Journey to Restoration I Thessalonians 5:23-24

REGISTRATION FORM

Last Name.		First Name:	<u></u>		MI:
Home Address:	City	:		_State:	_Zip Code:
Telephone:		Cell:		Email:	
Name of Church	/ou attend:				
	Anticipated Arrival Time:				
	Will you need transportation	□ Yes	🗖 No		
	Is this your first Retreat with First	st Baptist Church	of Hillside	🗖 Yes 🗖 No	
	Is this your first Retreat with First If yes who invited you?	•			
	-	•			
	If yes who invited you?	•			
1 st Option Name: Dav Phone:	If yes who invited you? My Emergency C	Contact Person is:	: This informa	tion is required.	
	If yes who invited you?	Contact Person is: R l:	: This informa elationship:	tion is required. Evening:	



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Please note that a Deposit is required to hold your room. Please submit completed Registration Form along with your Deposit to: M.I.T. Patricia M. Cowins or Sister Alisha Gorden. For additional information, please send an email to sistersinspirit@fbc-hillside.org or by contacting the church at 973-926-1244.