



Synod Assembly

Friday, June 16 and Saturday, June 17, 2017

Registrations Due April 18, 2017

Please circle one: Lay Voting Member Youth or Young Adult Voting Member Synod Council Member Visitor
 Minister of Word & Sacrament—Under Call/Contract Minister of Word & Service—Under Call/Contract
 Ministers of Word & Sacrament—Not Under Call Ministers of Word & Service—Not Under Call
 Ministers of Word & Sacrament—Retired Ministers of Word & Service—Retired

Name: (Reverend/Deacon/Mr/Mrs/Ms) _____

Mailing Address: _____
(street address, city, state, and zip code)

Phone with Area Code (best number to be reached) _____ E-Mail Address _____

Congregation/Organization Name and Town

Assembly Registration Fee — \$36 per person (Retired Rostered Ministers registration fee is waived.) \$ _____

Assembly Meals

\$45 Complete Meal Plan **or choose** (please circle)
 \$11.00 Friday Lunch \$14.00 Friday Dinner \$9.00 Saturday Breakfast \$11.00 Saturday Lunch \$ _____

Campus Housing—Swanson Commons

(Student dormitory, minimally furnished, only bed sheets provided, NO pillows, blankets, towels, drinking glasses, room service, etc.)
\$39—Single bed with shared bath (\$39 x ____ per person/per night = total due) I am Male/Female \$ _____

Assembly Bulletin of Reports

Download the Bulletin of Reports from synod website to print or save electronically—\$0.00
OR optional printed and bound Assembly Bulletin of Reports for \$30 (Retired Rostered Ministers discount - \$15) \$ _____
 Those not purchasing a printed and bound Bulletin of Reports are expected to download it from the synod website and bring it to Assembly in printed and/or electronic form.

Total Assembly Registration Fees [Make checks payable to Northern Illinois Synod] \$ _____

Yes, I would like Child Care. Please list names, ages, dates, and times child care is needed using reverse side of this form. The child care site is St. John's Lutheran Church, 4501 7th Ave., Rock Island, which is located a few blocks east from campus.

Special Dietary Needs: _____
(Note: If you require a gluten free meal, please list it here. Then inform the dining staff of your gluten free diet once meals are served.)

Mail Registration and Payment to:

Northern Illinois Synod Assembly, Augustana College, Sorensen Hall, 639 38th Street, Rock Island, IL 61201-2210

For Questions or Assistance, please contact Nancy Corey, Synod Registrar
 Telephone: 309-794-4004 • Fax: 309-794-2088 • E-Mail: ncorey@nisynod.org

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