



Individual/Group Registration Form

2019 EQUIPPING U • WINTER SEMINAR

Saturday, February 16, 2019

The Salvation Army Divisional Headquarters
16130 Northland Drive, Southfield, Michigan 48075

Please do not mail to above address. See mailing address below. Thank you.

Name #1			Church Name		
E-mail			Church E-mail		
Home Address			Church Address		
City	State/Province	Zip/Postal Code	City	State/Province	Zip/Postal Code
Home/Cell Phone			Church Phone		
Your Church Position/Ministry			Senior Pastor		

List the name, e-mail address, home address, and telephone number of each person being registered.

Senior pastor's registration is FREE with four paid registrations. Please print clearly.

Group Contact Name _____ **Phone (____) _____**

Name #2		
E-mail		
Home Address		
City	State/Province	Zip/Postal Code
Home/Cell Phone		
Your Church Position/Ministry		

Name #3		
E-mail		
Home Address		
City	State/Province	Zip/Postal Code
Home/Cell Phone		
Your Church Position/Ministry		

Registration Information

ALL REGISTRATIONS	# of attendees	\$ _____
	_____	\$ _____
Due to space limitations there are no onsite registrations.		Total Amount \$ _____
		Enclosed

Sorry NO REFUNDS. However, registrations are transferable.

Questions? Phone 248-557-5526 or FAX 248-557-6603

Email: info@theiceaonline.org | Website: www.theICEAonline.org

Mail your registration form to: International Christian Education Association

16130 Northland Drive | Southfield, MI 48075



Group Registration - 2019 EU • Winter Seminar

Group Contact Name _____ Phone (____) _____

Name #2		
E-mail		
Home Address		
City	State/Province	Zip/Postal Code
Home/Cell Phone		
Your Church Position/Ministry		
Name #4		
E-mail		
Home Address		
City	State/Province	Zip/Postal Code
Home/Cell Phone		
Your Church Position/Ministry		
Name #6		
E-mail		
Home Address		
City	State/Province	Zip/Postal Code
Home/Cell Phone		
Your Church Position/Ministry		

Name #3		
E-mail		
Home Address		
City	State/Province	Zip/Postal Code
Home/Cell Phone		
Your Church Position/Ministry		
Name #5		
E-mail		
Home Address		
City	State/Province	Zip/Postal Code
Home/Cell Phone		
Your Church Position/Ministry		
Name (Senior Pastor FREE)		
E-mail		
Home Address		
City	State/Province	Zip/Postal Code
Home/Cell Phone		
Church Phone		

Student Registrations

Name
Name
Name
Name
Name
Name
Name

Student Registrations

Name
Name
Name
Name
Name
Name
Name

You may copy this side for additional names