

2016 ANNUAL CONFERENCE HOUSING & MEAL PLAN REGISTRATION

Thursday, June 9 through Saturday, June 11, 2016

| | | | |
|----------------------|---|---|--------------------------------|
| NAME | _____ | | |
| ADDRESS | _____ | | |
| CITY | STATE | ZIP | _____ |
| PHONE | EMAIL | _____ | |
| CHURCH NAME | _____ | | |
| CHECK ALL THAT APPLY | <input type="checkbox"/> SINGLE | <input type="checkbox"/> COUPLE | <input type="checkbox"/> YOUTH |
| | <input type="checkbox"/> RETIRED PASTOR | <input type="checkbox"/> SURVIVING SPOUSE | |

The Board of Pensions covers Meal Plan 1 and accommodations for all retired pastors/spouses and surviving spouses.

ACCOMODATIONS

All guests will stay in James, Hardin, or Sexton Hall.

*** LINENS WILL NOT BE PROVIDED ***

Double Occupancy - \$25 per night per person

Single Occupancy - \$27 per night per person

Please list the names of those staying each night and circle gender

Wednesday _____ M F _____ M F _____ M F

Thursday _____ M F _____ M F _____ M F

Friday _____ M F _____ M F _____ M F

Accommodation Sub-total _____ (total # of nights stayed) X \$25.00 (\$27 for Single Occupancy) = _____

MEAL PLANS

Meal Plan 1 - \$61.00 Includes breakfast, lunch & dinner Thursday and Friday; and breakfast Saturday

Meal Plan 2 - \$18.00 Includes lunch Thursday, Friday

Meal Plan Cost _____ (number of Plan 1) X \$61.00 = \$ _____

_____ (number of Plan 2) X \$18.00 = \$ _____

Meal Plan Sub-total \$ _____

All retirees and their spouses must register for a meal plan to obtain a wrist band even if staying off campus.

Meal plan wrist bands must be worn to eat in cafeteria.

Meal plans do not include catered breakfasts or luncheons.

Annual Conference Registration continued

| PAYMENT METHOD (check one) | | TOTAL PAYMENT | |
|--|--------------------------------------|-------------------|--------------|
| <input type="checkbox"/> Paid for by Board of Pensioners | | Accommodations \$ | _____ |
| <input type="checkbox"/> Check made payable to Centenary College | | Meal Plans \$ | _____ |
| <input type="checkbox"/> Master Card | <input type="checkbox"/> Visa | Total \$ | _____ |
| <input type="checkbox"/> Discover | <input type="checkbox"/> Money Order | | |
| Card/Money Order # | _____ | | |
| Expiration Date | _____ | | |
| Name on Card | _____ | | |
| Signature | _____ | | |

Do you have any physical restrictions or dietary issues / allergies? ___Yes ___No

If Yes, please list: _____

Please note: every effort will be made to accommodate guests with physical restrictions or dietary issues. However, there are a limited number of first floor rooms available. It is not possible to accept requests for specific dormitories due to the large number of registrants.

MAIL REGISTRATION FORM TO:

Centenary College
Attn: Community Services
2911 Centenary Boulevard
Shreveport, LA 71104

CONTACT US:

Please direct questions to:
Kris Holland, Conference & Events Coordinator
Phone: 318-869-5778
Email: events@centenary.edu

Registration Dates: April 1 - May 15, 2016

****Please check in at the Fitness Center, across from the Conference registration tables****