

**Penn West Conference  
United Church of Christ  
59<sup>th</sup> Annual Meeting  
June 12, 9:00 am until Noon**

**Registration Form:**  
**You must fill out one for each person attending**

<b>Name:</b>	<b>Church:</b>	
<b>Address:</b>	<b>City:</b>	<b>Zip:</b>
<b>Telephone</b>	<b>E-mail:</b>	

Please  all that apply:

- |   |  |
|---|--|
| <input type="checkbox"/> PWC Ordained/Licensed/Commissioned | <input type="checkbox"/> PWC Delegate          |
| <input type="checkbox"/> PWC Board Member                   | <input type="checkbox"/> Church Youth Delegate |
| <input type="checkbox"/> Visitor                            | <input type="checkbox"/> Youth Visitor         |

Please  all that apply:

"This will be an online only meeting, using Zoom. You can download the free Zoom program at [www.zoom.us](http://www.zoom.us). You will also be able to phone in if you do not have internet access. A link to join the meeting and phone-in information will be sent after you register. If you will be using Zoom for the first time and would like assistance in advance of the meeting, please check here: \_\_\_\_\_

We strongly encourage you to download documents from the [www.pennwest.org](http://www.pennwest.org) website. If you need documents printed for you, there will be a fee of \$ 10.00 and must be requested by May 28, 2021.

**Registration Fee (includes Zoom Access for the meeting/but not printed documents) \$ 20.00**

<b>Registration fee:</b> \$ 20.00	_____
(Optional printing add \$ 10.00)	_____
<b>First offering:</b> Christian Associates of SW PA:	_____
<b>Second offering:</b> St. Paul's Continuing Care:	_____

**Total Payment included with registration:** \_\_\_\_\_

**\*\*Required ~Please list the Zoom username, e-mail, or phone number you will be using to connect to the meeting:**

Payment and registrations are due by *June 7, 2021*  
No refunds after June 7, 2021  
Please make checks payable to:  
***Penn West Conference  
312 S. Maple Ave, Suite PWC  
Greensburg, PA 15601***

Total Paid \$ \_\_\_\_\_  
\_\_\_ Cash  
**Paid by:**  
\_\_\_ Personal # \_\_\_\_\_  
\_\_\_ Church # \_\_\_\_\_  
\_\_\_ Date Recvd \_\_\_\_\_