

3 Ways to Register!

1 INTERNET
www.generalcouncil.ag.org

2 FAX 417-862-7891
(Must include credit card information)

3 MAIL
GC19 REGISTRATION
Convention Services Group
1445 N. Boonville Avenue
Springfield, MO 65802

Deadline

GC19 registration submitted by postal mail must be postmarked by **July 1, 2019**.

Refunds

Please see registration instruction page for details.

Delegate Registration (✚)

Important: Each General Council affiliated church (this does not include District Affiliated or Parent Affiliated Churches) is allowed **one** appointed delegate to vote at Council.

In order to vote, the Delegate certification **must** be filled out and accompanied by at least one signature.

The signature of the pastor or secretary of the board certifies that the delegate registered on this form has been appointed to serve as the official delegate for General Council, and also certifies that the church is a General Council affiliated church.

General Council Attendee (✚)

General Council Attendee includes members, adherents, students, and non-AG attendees **not participating in Fine Arts/AIM or attending Nat'l. Youth Convention (NYC)**.

Children 10 years of age and under **not attending Camp GC do not require a paid registration.

Influence Conference (◆)

The INFLUENCE CONFERENCE **is included** with registration. Registrants must select the box denoting their desire to attend and a ticket will be added to their registration. See generalcouncil.ag.org for more information on Influence breakout sessions.

Camp GC

A program for children grades K-6 will be provided with morning, afternoon, and evening activities. See the schedule for more information. Each child must be registered to participate.

Language Translation

Do you need language translation? (Check one)

ASL Spanish Other



GC19 REGISTRATION FORM

Orlando, FL | August 1-4

This will be my **first** GC to attend I am under the age of 18. (*)

First Name _____ Last Name _____

E-mail _____ Preferred Phone _____

Address _____

City/State/Zip _____ Country _____

If you prefer a **different City, State, or Country** printed on your badge, please specify below:

VOTING REGISTRATION

Preregistration – \$50 (Effective Monday, October 1, 2018 – Monday, July 29, 2019)

Onsite – \$70 (Effective Tuesday, July 30, 2019)

General Presbyter (✚) Ordained (✚) Licensed (✚) Delegate (✚)

YES, I would like a ticket to attend the **INFLUENCE CONFERENCE** (◆)

See generalcouncil.ag.org for more information on Influence breakout sessions.

(✚) Account No. _____ (✚) Church Acct. No. _____
From Credentials Card

(✚) Pastor or Secretary of the Board Signature _____

NON-VOTING REGISTRATION

\$50 (Effective October 1, 2018 – August 3, 2019 – no rate change)

YES, I would like a ticket to attend the **INFLUENCE CONFERENCE** (◆)

See generalcouncil.ag.org for more information on Influence breakout sessions.

Certified Minister General Council Attendee (✚)

CAMP GC REGISTRATION

Grade of Child (in Sept. 2019) _____ Age _____

Select appropriate category: Elementary
 Preschool
 Special Needs

PACKAGES

Best Value GC \$165 (\$200 after 6/1)
 Evenings ONLY \$85 (\$100 after 6/1)

DAY PACKAGES

Please select the day(s) you need

Wednesday Evening Only \$30 (\$36 after 6/1)
 Thursday All Day \$55 (\$66 after 6/1)
 Friday All Day \$55 (\$66 after 6/1)
 Saturday All Day \$55 (\$66 after 6/1)
 Sunday All Day \$55 (\$66 after 6/1)

SPECIAL FUNCTIONS (See Schedule for further details)

THU – Africa's Hope Luncheon \$45
 THU – Church Multiplication Luncheon \$50
 THU – Global University Luncheon \$25
 THU – For Every Woman Gathering (2-4 pm) \$18
 THU – Biblical Literacy Banquet \$40
 THU – PK Network Reception \$10
 THU – Late Night Party (ages 5-12) \$35 (\$45 after 6/1)
 FRI – Alliance for AG Higher Ed \$50
 FRI – Light for the Lost Luncheon \$50
 FRI – Sr. Ministers Lunch (Ages 64/Under) \$45
 FRI – Sr. Ministers Lunch (Ages 65+) No Charge
 FRI – Project Rescue Dinner \$25
 FRI – Hispanic Relations Reception \$10
 FRI – Under 40 Reception \$10

Reg Fees \$ _____ Special Function Fees \$ _____ **TOTAL** \$ _____

Payment Information VISA Discover MasterCard American Exp.

Card Number _____ Expiration Date _____

Name on Credit Card (Please Print) _____

Address _____