



# NDEM Conference Registration Form

Make out Checks to: Deaf Evangelism Ministry

Mail Registration Forms **Before JUNE 30<sup>th</sup>** to:

Sis. Mendy Olson • 1410 Alcan Dr • Menasha, WI 54952

**Church Information:** Church Name: \_\_\_\_\_

Church Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Church Phone: \_\_\_\_\_

Church Coordinator: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

District Coordinator: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Registration:**     Deaf /  Hearing     Male /  Female

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ B-day: \_\_\_\_/\_\_\_\_/\_\_\_\_

Video Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_     Can Receive Text

Interpreting Level:    Beginner    Intermediate    Advanced /    Yes    No Willing to Interpret at Conference

Interpreting Certifications:    State    RID    NAD    NIC    Other   Level \_\_\_\_\_    N/A

Deaf Track \$100 /  Hearing Track \$100 /  CEU Track \$175 /  Leadership Track \$175

Book Ad Half Page \$25 /  Book Ad Full Page \$50 /  Vendor Table \$40

Monthly Donations of \$35 for 12 mths (-\$100.00)                      Cost: \$ \_\_\_\_\_

**Spouse:**     Deaf /  Hearing     Male /  Female

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email Address: \_\_\_\_\_ B-day: \_\_\_\_/\_\_\_\_/\_\_\_\_

Video Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_     Can Receive Text

Deaf Track \$100 /  Hearing Track \$100 /  CEU Track \$175 /  Leadership Track \$175

Book Ad Half Page \$25 /  Book Ad Full Page \$50 /  Vendor Table \$40

Monthly Donations of \$35 for 12 mths (-\$100.00)                      Cost: \$ \_\_\_\_\_

**Child-1**     Deaf /  Hearing     Male /  Female    B-day: \_\_\_\_/\_\_\_\_/\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Children's Track (6-11 yrs) \$80 /  Youth Track (12+) \$80

**Child-2**     Deaf /  Hearing     Male /  Female    B-day: \_\_\_\_/\_\_\_\_/\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Children's Track (6-11 yrs) \$80 /  Youth Track (12+) \$80

**Child-3**     Deaf /  Hearing     Male /  Female    B-day: \_\_\_\_/\_\_\_\_/\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Children's Track (6-11 yrs) \$80 /  Youth Track (12+) \$80

(If you have more children you can write them on the back)

Cost: \$ \_\_\_\_\_

**Total Cost: \$ \_\_\_\_\_**