



Registration For LEAD Workshop I

Name _____

Address _____

Phone number _____

Email address _____

Church _____

Position in Church : (circle one) Lay Leader Pastor Other _____

Date of workshop registering for _____

Location of workshop registering for _____

\$10.00 registration fee

Make check out to: Central Conference

Send to: Central Conference 4055 W. Peterson Ave. Suite 106. Chicago, IL. 60646