## 2013 DIOCESAN CONVENTION REGISTRATION FORM



## Please submit one registration per person attending. \*\*\* PLEASE PRINT CLEARLY \*\*\*

## Return by Friday, October 11, 2013 with payment to:

The Episcopal Diocese of Pittsburgh, Convention Registration 4099 William Penn Highway, Suite 502, Monroeville, PA 15146

Questions? Contact Judi at irogers@episcopalpah.org or 412-721-0853

Title	First Name	Last Name				
Address Line 1			Address Line 2			
City Sta		State			Zip	
Email						
Home Phone			Cell Phone			
Parish Name and I	District			District		
Preferred First and	d Last Names fo	r Badge				
Convention Role  Lay Deputy Clergy Deputy Alternate Deputy Non-canonical Clergy Visitor Invited Guest			I will attend:  Both Friday evening and Saturday  Saturday only  Friday evening only			
Registration Fee – \$25  Make checks payable to "Episcopal Diocese of Pittsburgh"			burgh"	Do you have any special needs?  Check here for Gluten-Free  Other special needs, please specify:		
•	I this form with yo	our check to the a			on-reg and mail your che	ck or pay at the do

Name tag completed \_\_\_\_\_ Paid check # \_\_\_\_\_