				2014 DIOCESAN CONVENTION REGISTRATION FORM						
	Pleas	Please submit one registration per person attending. *** PLEASE PRINT CLEARLY *** Return by Friday, October 17, 2014 with payment to: The Episcopal Diocese of Pittsburgh, Convention Registration 4099 William Penn Highway, Suite 502, Monroeville, PA 15146 Questions? Contact Judi at jrogers@episcopalpgh.org or 412-721-0853								
Title	First Name									
Address Line 1			Address Line 2							
City State		State	Zip							
Email										
Home Phone			Cell Phone							
Parish Name and Location						District				
Preferred First	and Last Names f	or Badge								
Convention Role			I will attend:							
Lay Deputy			Both Friday evening and Saturday							
Clergy Deputy Alternate Deputy			Saturday only							
Non-canonical Clergy Diocesan Leadership / Staff Visitor Invited Guest		•	Friday evening only							
Registration Fee – \$30 Make checks payable to "Episcopal Diocese of Pitts			sburgh"	Do you have any special needs? Check here for Gluten-Free Other special needs, please specify:						
 You may OR regist CHECKS 	S MUST BE SUE	your check to the a piscopalpgh.org/20	14-conventic VANCE IN	on-reg EITH	and mail your check to IER CASE _ Paid check #					