

## Building on the solid Rock

Anglican Network in Canada national conference

### Conference registration (Please complete a separate registration for each person)

Please note, conference is open **only** to Network members or members of Network parishes. For Network membership information see: [www.anglicannetwork.ca/join.htm](http://www.anglicannetwork.ca/join.htm) or call 1-866-351-2642.

<b>Network member</b>	I am a Network member: <input type="checkbox"/> yes <input type="checkbox"/> no		I am a member of a Network parish: <input type="checkbox"/> yes <input type="checkbox"/> no		I am... <input type="checkbox"/> clergy <input type="checkbox"/> laity
<b>Name</b>	<b>Title</b>	<b>First name</b>		<b>Surname</b>	
<b>Address</b>	<b>Street:</b>				
	<b>City/Town</b>		<b>Province</b>	<b>Postal Code</b>	
<b>Contact</b>	<b>Daytime phone</b>		<b>Fax</b>	<b>Email (if any)</b>	
<b>Church</b>	<b>Home church</b>			<b>Diocese</b>	
<b>Special needs</b>	<b>Food:</b> I have allergies or require special meals <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please specify: <b>Other:</b> I have other special needs:				

### Accommodation (Available billets are limited and we cannot guarantee billet requests will be met.)

- I will make my own hotel or private arrangements.  I would like to be billeted, if possible.

If requesting billeting, please specify:

I require a billet that is:  smoking  non-smoking

I have special needs (eg. allergy to pets, wheel chair accessibility, etc). Please specify:

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### Travel

- I have my own vehicle and will NOT require transport from the conference volunteers.

- I will not have a vehicle and request transport from the conference volunteers.

Please note, a schedule of bus transport will be made available after November 12.

### Arrival (Only complete if you are requesting transportation)

- I wish to be picked up and will be arriving in (city) \_\_\_\_\_ by:  bus  train  plane

Date: (Nov) \_\_\_ Time: \_\_\_\_\_ If plane, (airline & flight #): \_\_\_\_\_

### Departure (Only complete if you are requesting transportation)

- I request transportation after the conference to (city) \_\_\_\_\_  bus  train  plane

Date: (Nov) \_\_\_ Time: \_\_\_\_\_

## Conference registration (cont.)

**Shuttle between hotel and conference facility** (Only complete if you need transportation)  
Please note that the conference facility is not within walking distance of any hotel.

- I would like shuttle service to and from the conference. Please list name of hotel ... or address of private accommodation ... or, if requesting a billet, simply note "billet requested".
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## Dinner

A dinner is planned for Friday evening (Nov. 23) at the Holiday Inn, Burlington, for those able to stay. The cost is \$35 per person and is not included in your registration fee. If attending, please add \$35 to your registration fee.

- Yes, I'll stay for dinner Friday evening     No, I'm not able to stay.

## Conference payment

Please note, while we request a separate *registration* form for each person, your *payment* can be made for more than one person.

An additional **\$25** charge will apply for payments received after November 12. (Please note that space is limited, and we may not be able to accommodate late registrations.)

### I wish to pay by:

- Enclosed cheque** (Please make payable to "**Anglican Essentials Canada**" and note "**for Network Conference**" on the *memo* line. Mail cheque with this registration form.)

**Number of people for whom payment is being made:** \_\_\_\_\_

**List names** (Please print clearly):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Special donation (optional)** A receipt for income tax purposes will be provided at year-end.

- I wish to make a special donation to help offset ongoing operating costs of the Network.
- I wish to give to a bursary fund to assist members needing help to attend the conference.

Donation (optional) \$ \_\_\_\_\_

Total conference fees (\$200/person, \$225 after Nov. 12) \$ \_\_\_\_\_

Total payment for Friday dinner, if attending - at \$35/person \$ \_\_\_\_\_

**Total cheque** (enclosed or to be paid on Nov 22) \$                     

**Mail registration form and payment to:**  
**Network Conference Registration, PO Box 266, Milton, Ontario, L9T 4N9**