



# EXPERIENCING GOD THROUGH KINGDOM BUILDING

**July 12 – 15, 2010**

**EARLY REGISTRATION DEADLINE – JUNE 25, 2010**  
**FOR ADDITIONAL INFORMATION PLEASE CALL 301-431-3474**

~ How to Register ~

†Register Online at [www.churchalivemjbc.org](http://www.churchalivemjbc.org) –or – FAX your completed form with credit card information to 301-431-1595

†Mail your completed form with payment to: **Church Alive! Ministry Leadership Conference**

c/o Mount Jezreel Baptist Church  
 420 University Boulevard, East  
 Silver Spring, MD 20901



†Please Print or Type. One Registrant Per Form. Please submit group reservations at the same time. Please include payment with registration. Forms submitted without payment will not be processed.

REGISTRANT INFORMATION	SPECIAL NEEDS
Name: _____	<input type="checkbox"/> Check here if you have a disability we should be aware of.  <input type="checkbox"/> Check here if you have a dietary need we should be aware of.  Please attach a written description of your needs and how we may assist.
Home Address: _____	
City: _____ State: _____ Zip: _____	
Home Phone No. _____ Email: _____	
Church/Organization: _____	
Church/Organization Address: _____	
City: _____ State: _____ Zip: _____	
Church Phone No. _____ Denomination _____	
Please check one: <input type="checkbox"/> Pastor <input type="checkbox"/> Clergy <input type="checkbox"/> Lay	

REGISTRATION FEES			
INCLUDES ALL CONFERENCE SESSIONS, MATERIALS AND 5 MEALS			
	Early Registration By June 25, 2010	After June 25, 2010	Amount Due
INDIVIDUAL REGISTRATION	\$125.00	\$150.00	\$ _____
PASTOR'S ALTERNATIVE PROGRAM (PAP)	\$225.00	\$250.00	\$ _____
GROUP REGISTRATION (Group of 3-5 participants)	\$ _____ 10% Discount	\$ _____ 10% Discount	\$ _____
MJBC MEMBERS	\$50.00	\$50.00	\$ _____
<input type="checkbox"/> I am unable to attend, but would like to donate to the conference			\$ _____
TOTAL AMOUNT ENCLOSED			\$ _____
All Checks Made Payable to Church Alive! Ministry Leadership Conference			
Credit Card: <input type="checkbox"/> AMEX <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER <input type="checkbox"/> PAYPAL			
Credit Card Number: _____	Expiration Date (MM/YY): _____		
Name on Credit Card: _____			
Credit Card Billing Address (if different from above) _____			
Cardholder Signature: _____	Date: _____		

\* The Pastors Alternative Program ("PAP") is a Christian Education Certification training approved and conducted by the National Baptist Convention USA, Inc.  
 \* Ministers who enroll in the PAP Tract are automatically registered for the Church Alive Conference.