



NDEM Conference Registration Form

Make out Checks to: Deaf Evangelism Ministry

Mail Registration Forms Before June 30th to:

Sis. Mendy Olson • 1410 Alcan Dr • Menasha, WI 54952

ONE DAY PASS

Church Information: Church Name: _____

Church Address: _____ City: _____ State: _____ Zip: _____

Pastor's Name: _____ Church Phone: _____

Church Coordinator: _____ Cell Phone: _____

District Coordinator: _____ Cell Phone: _____

Registration: Deaf / Hearing Male / Female

First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ B-day: ____/____/____

Video Phone: _____ Cell Phone: _____ Can Receive Text

Interpreting Level: Beginner Intermediate Advanced / Yes No Willing to Interpret at Conference

Interpreting Certifications: State RID NAD NIC Other Level _____ N/A

Deaf Track \$40 / Hearing Track \$45 / CEU Track \$65 / Leadership Track \$60

Book Ad 1/4 Page \$50 / Book Ad Half Page \$100 / Book Ad Full Page \$200 **

Vendor Table \$40 / Meet & Greet \$20 / ** Lunch Not Included Cost: \$ _____

Spouse: Deaf / Hearing Male / Female

First Name: _____ Last Name: _____

Email Address: _____ B-day: ____/____/____

Video Phone: _____ Cell Phone: _____ Can Receive Text

Deaf Track \$40 / Hearing Track \$45 / CEU Track \$65 / Leadership Track \$60

Book Ad 1/4 Page \$50 / Book Ad Half Page \$100 / Book Ad Full Page \$200 **

Vendor Table \$40 / Meet & Greet \$20 / ** Lunch Not Included Cost: \$ _____

Child-1 Deaf / Hearing Male / Female B-day: ____/____/____

First Name: _____ Last Name: _____

Nursery DayCare (0-5) \$25 / Children's Track (6-11 yrs) \$40 / Youth Track (12↑) \$40

Child-2 Deaf / Hearing Male / Female B-day: ____/____/____

First Name: _____ Last Name: _____

Nursery DayCare (0-5) \$25 / Children's Track (6-11 yrs) \$40 / Youth Track (12↑) \$40

Child-3 Deaf / Hearing Male / Female B-day: ____/____/____

First Name: _____ Last Name: _____

Nursery DayCare (0-5) \$25 / Children's Track (6-11 yrs) \$40 / Youth Track (12↑) \$40

(If you have more children you can write them on the back)

Cost: \$ _____

**Deadline to have ad in the Program Book is May 31st

Total Cost: \$ _____