## **PSD Annual Conference Registration Form**

 Register by mail to First Unitarian Society, 900 Mt. Curve Ave, Minneapolis, MN 55403 or online at www.psduua.org/AnnualConference.



- Please copy the registration form for each attendee 12 and older.
- Adults who register by March 16, 2007, will receive an early registration discount.
- Adult registration includes Saturday breakfast, lunch, and dinner and Sunday breakfast.
- For each youth registrant (age 12-18), please attach enclosed youth registration form, and include the name of the adult sponsor who will be attending the conference.
- Register children 11 and vounger on an adult's form.

Registrant				
Name (as it will appear on badge):				
Address:				
Street Apt	C	City Sta	ate ZIP	
Evening phone:		_ Email:		
Name of congregation: City, State:				
☐ Yes, my contact information may be she	ared with other partic	ipants as part of a confe	rence participant	s' roster.
Workshop Registration - Please i	indicate Saturday w	orkshop preferences	by workshop nu	umber, below:
SESSION A, 10:30-11:45 AM SESSION B,		1:30 to 2:45 PM <b>SESSION C</b> , 3:15 to 4:30 PM		
First choice: #A First choice:		#B	First choice: #C	
Second choice: #A	Second choi	ce: #B Second choice: #C		
CHILD REGISTRATION  Your registration must be postmarked no later than April 1, 2007, to be eligible for childcare. Childcare with age-appropriate activities for		REGISTRATION FEES  Please use a separate form for each adult registration and each youth registrant.		
children younger than twelve will be provided for		Registration: \$135/	adult; \$50/youth	\$
child. Care will be available Saturday, 8:45 AM- PM. Fee includes Saturday lunch, dinner, and s		Early registration discount (adults only); must be postmarked before March 16, 2007.		
Child's name:				<b>#45.00</b>
Child's name:	•	Childcare (number of	<u> </u>	- \$15.00 \$
TABLE TOPICS At breakfast on Saturday and Sunday, you'll have opportunities to talk with others interested in a common topic. If you have an idea for a table topic, please note it here:		Voluntary contribution		\$
			Total enclosed:	\$
Are you willing to lead the discussion? □Yes □ No  SPECIAL NEEDS: I would like: □ Home Hospitality lodging □ To have my name on the "want a roommate" list and to be sent a copy		PAYMENT BY CHECK Please make check payable to: PSD Conference – FUS and mail with this completed form to PSD Annual Conference, FUS 900 Mt. Curve Ave. Minneapolis, MN 55403		
☐ To have my name on the "want to carpool" list and to be sent a copy		PAYMENT BY CREDIT CARD Credit cards are accepted only online.		
<ul> <li>□ Vegetarian meals</li> <li>□ Other special assistance to participate in the conference or dietary needs (describe):</li> </ul>		Register online at <a href="https://www.psduua.org/AnnualConference">www.psduua.org/AnnualConference</a> and pay by American Express, Discover, MasterCard, or Visa.		