

## Offerings - Registration Form

Event : \_\_\_\_\_

Location: \_\_\_\_\_

Event Date: \_\_\_\_\_

### Your Information

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City : \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Please complete this form and send it with your registration check to:

Debbi Brown  
7804 S. 13th St.  
Phoenix, AZ 85042