

# Walking Together

## Registration

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

City: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_

### Fees:

Individuals = \$ 20

Presenters = 1st Presenter=free; all others \$20

Youth/Young Adults (25 and younger) = Free

### Send completed form and check to:

Northwest Synod of WI  
944 24 1/4 Street Suite 2  
Chetek, WI 54728

### Registration Deadline:

**March 10, 2017**

#### Individual's Name

#### Email

1. \_\_\_\_\_

\_\_\_\_\_

#### Presenter's Name

#### Email

1. \_\_\_\_\_

\_\_\_\_\_

#### Youth/Young Adult's Name

#### Email

1. \_\_\_\_\_

\_\_\_\_\_