

Register for lunch during the Believe Conference

Saturday, April 17th, 12:30-2:30 pm at Park Place CHOG

Church Name _____

Contact person _____ Cell # _____

Contact person's email _____

Number of people attending _____

Please send this completed form, along with \$5 per person to:

Joshua Weiger
Park Place Church of God
501 College Drive
Anderson, IN 46012

Make checks payable to "Park Place Church of God" with "COG Believe Lunch" in the memo line