

Church of God in Christ  
Florida Eastern Ecclesiastical Jurisdiction  
Mother JoAnn G. Hill, Jurisdictional Supervisor  
Bishop Jimmie L. Williams, Jurisdictional Prelate

58<sup>th</sup> Annual Women's Convention  
& Leadership Conference  
**September 12 – 15, 2017**

**Housing & Convention Site**  
**Fort Lauderdale Marriott North Hotel**


6650 North Andrews Avenue - Ft. Lauderdale, FL 33309  
Telephone: (954) 771-0440

**Room Rate: \$109.00 per night**  
**(No Tax – if paid by August 30, 2017)**

Hotel Stay (# of Nights)	Amount due (single occupancy)	Amount per person (double occupancy)
1	\$109.00	\$54.50
2	\$218.00	\$109.00
3	\$327.00	\$163.50
4	\$436.00	\$218.00

**Method of Payment:**

- Cash is only accepted when paying in person.
- Checks & Money Orders should be made payable to **Church of God in Christ Women's Department**.
- Credit Cards are accepted. **An additional \$3.00 will be charged.**

 **Mail this form and your full payment to:**  
**Ms. LaWanda R. Hill**  
**14530 Booker T Washington Blvd.**  
**Miami, FL 33176-7336**

**Housing Coordinator:**  
**Sister Desiree Wright ~ 305-900-4709 Voicemail**  
**Fax (305) 252 – 1113**  
**Email: Efloridadow@aol.com**



## **Housing Registration Form**

Please send housing form **along with payment** on or before **August 30, 2017** to ensure hotel accommodations. \*Roommates must register together. Submit **ONE** form for each room requested. You may copy this form if needed. **PLEASE PRINT LEGIBLY-** \*Hotel confirmation letters will be emailed to the email address listed below.

Room Accommodations: (please check one)

- Single     Double (two beds)     Double (1 King-size bed)  
Person(s) Occupying Room: (Roommate #1)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ District \_\_\_\_\_

Email Address \_\_\_\_\_

Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_

**Share Room With: (Roommate #2)**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ District \_\_\_\_\_

Email Address \_\_\_\_\_

Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_

**Special Request(s) for Room:**

\_\_\_ Low Floor    \_\_\_ Handicap Room    \_\_\_ Near Elevator

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**58<sup>th</sup> Jurisdictional Women's Convention**  
September 12 – 15, 2017

**Convention Registration Form**

**\$25.00** – per delegate

**Registration fee includes:**

Convention Bag, Program Book, and  
Continental Breakfast **\*\*FRIDAY MORNING (Marriott Hotel)**

*(PLEASE PRINT)*

**Primary Registrant:**

**Name** \_\_\_\_\_

**Cellular Number** (\_\_\_\_) \_\_\_\_\_

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

**Local Church:** \_\_\_\_\_

**Pastor:** \_\_\_\_\_

**District:** \_\_\_\_\_

**Additional Delegates:**

**Name** \_\_\_\_\_

**Name** \_\_\_\_\_

**Name** \_\_\_\_\_

**Name** \_\_\_\_\_

**Name** \_\_\_\_\_

\_\_\_\_\_  
Primary Registrant Signature

\_\_\_\_\_  
Date

**Total Number of Delegates:** \_\_\_\_\_ @ \$25.00

**Total Amount Due:** \$ \_\_\_\_\_

Method of payment:

\_\_\_\_ Cash (*only accepted when paying in person*)

\_\_\_\_ Check \_\_\_\_ Money Order (*Mail to LaWanda R. Hill*)

\_\_\_\_ Credit Card *\*(If paying by CC, call Desiree Wright (305)900-4709)*

Registration forms can be submitted via:

U.S. Mail: **LaWanda R. Hill**  
**14530 Booker T. Washington Blvd.**  
**Miami, FL 33176**

Scan/Email: **Efloridadow@aol.com**

Fax: **(305) 252 – 1113**

*Thank you for supporting the Florida Eastern Ecclesiastical  
Jurisdictional Women's Convention. God bless you! To God Be the  
Glory!*

**DO NO**

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