



August 6-11, 2019

District/Church Registration Form

(Please print)

District: _____

Superintendent: _____

Church Name: _____

Pastor: _____

<u>Last Name</u>	<u>First Name</u>
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

	Number of Registrants		Amount Due (\$)
Registration (\$25)	X	=	
Total Amount Due			\$

Please mail form to address below no later than July 21, 2019.
 Florida Eastern P.O. Box 101358; Ft. Lauderdale, FL 33310
 Please make checks payable to: FEEJ