

Pre-Retirement Seminar Registration

Name(s): _____

Address: _____

Phone: _____ E-mail: _____

Projected date of retirement (this is for projection purposes only and is not binding or public information):

Any dietary or special needs that we should be aware of?

Registering as individual: \$75 _____

As a couple: \$100 _____

Commuting? _____ Need a room? \$100 _____ (WE WILL make this reservation for you!)

Please return this form, along with your check made out to Preachers' Aid Society, to:

PASBF
P.O. Box 19207
Springfield IL 62794-9207

A confirmation e-mail will be sent to you immediately upon receipt and a printed agenda mailed to you a week preceding the seminar. We seek to bring in the best experts to answer your questions and make this time very beneficial for you. Blessings on you in your present ministry and as you seek to prepare for your future.

Any questions? Call Keith or Carol at 217-529-3221, Monday-Friday.

The hotel is wanting room reservations by January 7 so please let us know promptly. Thanks!!