

METRO EQUITY SUMMIT FOR THE METROPOLITAN REGION OF ATLANTA

REGISTRATION FORM

You must register your attendance for the Summit and reserve your lunch.

Registration Fee: \$10.00

Organization Name			
Address			
Address Line 2			
City, State, Zip		Phone	() -
Attendee Name 1			
Lunch Preference	<input type="checkbox"/> Regular <input type="checkbox"/> Vegetarian		
Phone		Fax	
E-mail Address			
Attendee Name 2			
Lunch Preference	<input type="checkbox"/> Regular <input type="checkbox"/> Vegetarian		
Phone		Fax	
E-mail Address			
Attendee Name 3			
Lunch Preference	<input type="checkbox"/> Regular <input type="checkbox"/> Vegetarian		
Phone		Fax	
E-mail Address			
Attendee Name 4			
Lunch Preference	<input type="checkbox"/> Regular <input type="checkbox"/> Vegetarian		
Phone		Fax	
E-mail Address			
Attendee Name 5			
Lunch Preference	<input type="checkbox"/> Regular <input type="checkbox"/> Vegetarian		
Phone		Fax	
E-mail Address			
Attendee Name 6			
Lunch Preference	<input type="checkbox"/> Regular <input type="checkbox"/> Vegetarian		
Phone		Fax	
E-mail Address			
Registration Totals:	Attendee Totals	_____ @ \$10.00 each	Total \$ Amount \$

MAKE CHECKS PAYABLE TO: ABLE/Gamaliel

PAYMENT TYPE: Check Money Order

FORM SUBMITTAL: FAX: (404) 389-0594 E-MAIL: dprice@rccatl.org MAIL TO THE ADDRESS BELOW

ABLE/Gamaliel c/o Regional Council of Churches Atlanta 2195 DeFoor Hills Road, NW #L Atlanta, GA 30318