



2019 Adult Registration Form – FULL WEEKEND

Complete one form for each registrant

Convention Dates: June 7-9, 2019

Make copies of the blank before you start

Registration deadline May 30, 2019

To Register: Everyone coming to any part of Convention must complete a form and mail it with full payment to the Episcopal Diocese or Albany, 580 Burton Rd, Greenwich, NY 12834 or register and pay online at www.albanyepiscopaldiocese.org.

Deputies/alternates: Your parish must send the Certificate of Election to Deacon Marian Sive

Full Name: _____ Preferred for Name Badge: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell or Work: (____) _____ Email: _____

(For acknowledgement)

Parish Name and City: _____

Registration Category (check one): ___ Priest ___ Deacon (Canonically Resident Clergy only)

 ___ Deputy ___ Alternate ___ General Registrant

Do you have a specific roommate request? ___ Yes Please include their name (s) and parish(es) below:

Accommodations are double occupancy only. Room reservations are filled in the order the registrations are received. Rooms are only assigned after full payment is received. If a private room is desired, please register as a commuter and make your own accommodation arrangements off-site. Questions: Please call the Convention Office at the Diocese at 518-692-3350 or email convention@albanydiocese.org.

Registration: *Choose one* All categories below include all meals (Friday dinner – Sunday lunch), activities, and refreshments at the Tee-Pee Snack Bar.

___ Adult Lodging \$180.00

___ "Rustic" Lodging \$135.00

___ RVs \$119.00

Add Friday lunch for \$10.00? ___ YES

Total Due: _____

Calculate your fees from all registration forms and mail all forms and FULL payment to
Convention Registration, Episcopal Diocese of Albany, 580 Burton Road, Greenwich, NY 12834.

Method of Payment: ___ Check or Money Order (made payable to The Episcopal Diocese of Albany) -or-

___ Credit Card VISA/MSTERCARD/DISCOVER # _____ Exp. Date: _____

Name as it appears on Credit Card: _____ CVV #: _____

Billing Address for credit card: _____ State: _____ Zip: _____

Only PRE-PAID Registrations are accepted and are due by May 31, 2019. No refunds or cancellations after May 31, 2019.

Would you like to volunteer at convention? ___ Yes, I would like to help with: (please check no more than two)

___ Pre-convention prep ___ Registration at COTW ___ Vacation Bible School ___ Ushering ___ Day Care

Do you have special needs? ___ Cot in room ___ Crib in room ___ Physical limitations/considerations (please list below)

If you have any dietary concerns, please notify Camp of the Woods Front Desk Staff in Purdy Center upon arrival.
Will you be arriving after 9pm? You need to arrange this in advance with Carol Drummond at the Convention office.