

G. Vosper Registration Form

Please clearly print your information.

Name(s) (as desired on name tag)

Address: _____

City _____

State _____ Zip Code _____

email address:

Phone: _____

Friday/Saturday \$60 per person _____

Friday only: \$20 per person _____

Saturday only: \$40 per person _____

Saturday lunch: \$10 _____

Make checks payable to The Good Shepherd UCC, indicating "Vosper Seminar" on the memo line. Mail to: The Good Shepherd UCC, 17750 S. La Cañada Dr., Sahuarita, AZ 85629