

# Registration Form

## CID LCMS Fall Pastors' Conference

### Online Registration Form (Preferred Method)

<https://form.jotform.com/240045128624045>

(Electronic payment is now available through the online form.)

### Mail-In Registration Form

April 15-16, 2024

Name: \_\_\_\_\_ Congregation: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Pastor \_\_\_\_\_ Vicar \_\_\_\_\_ Emeritus\* \_\_\_\_\_ DCE \_\_\_\_\_ Deaconess \_\_\_\_\_

Wife (attending conference) \_\_\_\_\_ Candidate \_\_\_\_\_ Other \_\_\_\_\_

\*Conference fees are waived for Emeriti and their wives. However, please submit this registration form.

**Registration Fee:** \$70 regular (\$0 for Emeritus) \$ \_\_\_\_\_

Registration fee includes participant lunch and dinner on Monday and lunch on Tuesday.

Meal for spouse/guests not attending conference:

Mon. Lunch (\$10 for guests) \$ \_\_\_\_\_

Mon. Dinner (\$20 for guests) \$ \_\_\_\_\_

Tues. Lunch (\$10 for guests) \$ \_\_\_\_\_

Total enclosed: \$ \_\_\_\_\_

Complete this form by hand and mail **to the District Office** with a check for your total expenses made payable to the **Central Illinois District—LCMS** no later than March 21, 2024.

Conference Registration  
Central Illinois District—LCMS  
1850 N. Grand Ave. West  
Springfield, IL 62702-1626

This is an official District Conference. Attendance is obligatory (Synod Bylaw 4.8.2(d)(1)). If you have not registered by **March 21**, the District Office will contact you. If you are unable to attend any portion of this conference, please send regrets (with reason for your absence) to the Conference Committee Secretary: Rev. Brian Johnston, Trinity Lutheran Church, 1010 N Webster St, Taylorville, IL 62568 or email at [pastor@tlctaylorville.com](mailto:pastor@tlctaylorville.com) or to Pres. Michael Mohr at the District Office: [mmohr@cidlcms.org](mailto:mmohr@cidlcms.org).