



2018 Convention Adult Registration Form

Full Weekend



Complete one form for every registrant.

Convention Dates: June 8 - 10, 2018

Make copies of the blank form before you start.

Registration Deadline: May 30, 2018

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

DEPUTIES/ALTERNATES: Your parish must send the Certificate of Election to Archdeacon Harvey Huth.

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**
 General **Alternate**

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 518-692-3350 or email convention@albanydiocese.org.

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

Adult (Choose one): Full Weekend \$175 Rustic A-Frame \$120 RV \$114

(Optional) Friday Lunch \$10 (**everyone** age 5 and up) - meal ticket issued at registration

TOTAL FEE: \$ _____

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*)

Credit Card: VISA/MASTERCARD/DISCOVER # _____ Exp Date: _____

Name as it appears on credit card: _____ CVV #: _____

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

ONLY PRE-PAID Registrations are accepted & are DUE by May 30. NO REFUNDS FOR CANCELLATIONS AFTER May 31.

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

Pre-convention preps 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)

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 9 pm? You need to arrange this in advance with Carol Drummond at the Convention office.