



Reservation Form

Please return this form, along with deposit, by February 15th to complete Step 2

Contact Person: _____	Registration #: _____
Church: _____	Email: _____
Address: _____	
City: _____	ST: _____ Zip: _____
Phone: _____	Alt. Phone: _____

Deposit Info

- Branson, MO - April 23-25
- Branson, MO - April 25-27
- Myrtle Beach, SC - April 30-May 2

We need accommodations for a total of _____ participants x \$75 deposit each = _____
 (Please List Rooming Assignments on the Following Page)

We need the conference only for a total of _____ participants x \$40 deposit each = _____

____ Enclosed is a check to Jubilee Conferences for Total Deposit of _____

OR Credit Card #: _____ Exp: _____

By signing below, you acknowledge that you have read and understand the enclosed policies and information (including the cancellation and refund policies) and that you agree to abide by them.

You also authorize the above credit card (if applicable) to be charged for the registration deposits necessary to complete your registration.

Signature _____