

CONTEMPLATE...

REGISTRATION FORM (CHECK THE BOX THAT APPLIES)

OCTOBER 7-9, 2010

MARCH 10-12, 2011

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone: (_____) _____ Age: _____ Marital Status: _____

E-mail Address: _____

I am interested in Pastoral Ministry Deaconess Ministry

My spouse is interested in Pastoral Ministry Deaconess Ministry

Guest(s) attending with you:

Name	Gender	Relationship to You
_____	_____	_____
_____	_____	_____
_____	_____	_____

Travel Plans

I will be arriving on (Date and Time): _____

I will be arriving by: private car air** bus** train**

** If arriving by air, bus or train please provide airline, bus, or train name and number:

** If arriving by train or bus, which bus or train station you will be using? _____

I/we will need local transportation to and from Concordia Seminary.**

I/we will not need local transportation to and from Concordia Seminary.

Lodging Plans

I/we would like to stay in guest housing on the Concordia Seminary campus.

(Note: This may mean that you will be housed with a Seminary family.)

I/we plan to make arrangements and will not need guest housing.

Additional information Concordia Seminary should know to serve you better (allergies, disabilities, etc.):

Please return this form to: Concordia Seminary, Office of Admissions and Ministerial Recruitment
801 Seminary Place, St. Louis, MO 63105 or admissions@csl.edu
800-822-9545 Fax: 314-505-7229

Forms must be returned by September 23, 2010, for Fall *Contemplate...*

and by February 24, 2011, for Spring *Contemplate...*

You will receive a letter confirming your registration upon receipt of this registration form. Please contact the admissions office if you do not receive a letter to confirm your registration.

