

FROM
EMBERS
TO A



REGISTRATION FORM

Conference Dates: _____

Pastor's Name: _____

Title: _____

Church Name: _____

Church Address: _____

City: _____ State: _____ Zip: _____

Church Phone: _____

Pastor's Cell No. _____

Fax: _____

Pastor's Email: _____

Must have pastor and at least one key leader to attend.

Leader's Name: _____ Title: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Email: _____

Please add a separate sheet to register more participants and include all the information requested above.

PLEASE SUBMIT A \$25 PER PERSON NON-REFUNDABLE DEPOSIT WITH REGISTRATION. Make checks payable to Briarwood and send to the address below.

SCHOLARSHIPS

Partial scholarships available to qualified applicants.

Please email us a scholarship application.

Denominational Affiliation: _____
Total Local Church Membership: _____
Total Adult professions of faith in last 5 years: _____

Send to:
Embers to a Flame
Briarwood Presbyterian Church
2200 Briarwood Way
Birmingham, AL 35243