

## Shepherd's Travelers Registration Form

Complete this form and mail it with your payment to Shepherd's Center, 302 West Market Street, Room 103, Greensboro, NC 27401.

*\*Payment must be made to reserve your space.*

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Congregation \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Trip Location \_\_\_\_\_

Trip Date \_\_\_\_\_

Cost \_\_\_\_\_  My payment is enclosed.