

COME WITH ME INTO THE FIELD...FOR THE HARVEST

2007 WCCRE Conference Registration Form (Part I) - November 8 - 11, 2007

Note: Please see over for Part II - Choice of focus & workshop sessions for Saturday

Name: _____ Mailing Address: _____ _____ E-mail: _____ Phone: _____ Diocese: _____ Do you want your name included on the participant list: Yes <input type="checkbox"/> No <input type="checkbox"/> Send Registration by: mail <input type="checkbox"/> Or fax <input type="checkbox"/> (Fax #) 867.393.6370 Make Cheques payable to WCCRE	Mail Registrations to: Katie Shewfelt 4 Teak Avenue Whitehorse, YT Y1A 4W6 Phone: (867) 667-5901 Fax: (867) 393-6370
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“Come with me into the field...for the harvest”

2007 WCCRE Conference Registration Form (Part II) - Focus & workshop Sessions, Nov. 9 & 10

Please indicate your choice for each session time. Session numbers are listed beside the descriptions.

Friday 1:30 11-09-07 <i>Indicate your choices</i> <i>by session number</i> _____ First Choice _____ Second Choice _____ Third Choice	Saturday 1:30 11-10-07 <i>Indicate your choices</i> <i>by session number</i> _____ First Choice _____ Second Choice _____ Third Choice	Saturday 3:00 11-10-07 <i>Indicate your choices</i> <i>by session number</i> _____ First Choice _____ Second Choice _____ Third Choice	HOSPITALITY <i>Please indicate any Food allergies:</i> _____ _____ Special needs: _____ _____
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