

**FAMILY LIFE DEPARTMENT
COUPLES SEMINAR
Date: February 16, 17, 18, 2018
REGISTRATION FORM**

PARTICIPANT INFORMATION Please write legibly

COUPLES LAST NAME: _____

FIRST NAMES: _____

Home address: _____

Parish: _____

Telephone: _____ **Cell:** _____

Email address: _____

Church: _____

Church Office: _____

() We will be attending this very important Seminar.

Sunday (includes special treat). Registration fee \$40.00

Deadline for final payment: **Thursday, February 08, 2018**

Make cheques payable to: East Caribbean Conference of SDA