



2016 Conference Annual Gathering

Missouri Mid-South Conference UCC

“Gathering at Our Table...For Such a Time as This 3.0!”

Thursday, June 9 - Saturday, June 11, 2016
Holiday Inn Executive Center - Columbia, MO

Registration Deadline - Wednesday, June 1st!

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Please check ONE box below:

- | | | |
|---|---|---|
| <input type="checkbox"/> Lay Delegate | <input type="checkbox"/> Ordained Minister | <input type="checkbox"/> Certified Christian Educator |
| <input type="checkbox"/> Youth Delegate | <input type="checkbox"/> Licensed/Commissioned Minister | <input type="checkbox"/> Conference/Association Officer |
| <input type="checkbox"/> Youth Visitor | <input type="checkbox"/> Adult Visitor | |

First & Last Name: _____
(as you want it to appear on your name tag)

Street: _____ City: _____ State: _____ Zip: _____

Church/Institution/Agency: _____ City: _____

Daytime/Cell Phone: _____ Evening Phone: _____

Email Address: _____

Emergency Contact: _____ Emergency Contact Phone: _____

Relationship to Contact Person: _____

REGISTRATION PRICES/OPTIONS:

Base Price: - Includes cost of registration, worship and workshop/programming materials. Meals (6): Thursday plated lunch/dinner buffet, Friday breakfast buffet/plated lunch/dinner buffet, and Saturday breakfast buffet.

☐ **\$190.00** for Conference delegates, clergy and visitors (\$225.00 after June 1)

☐ **\$90.00** for registration as a Youth, 7th - 12th grade (\$125 after June 1)

NOTE: Supervision of youth will be the responsibility of their host church delegates/pastors or their parents.

DAILY OPTIONS: - the following options are for those unable to attend CAG all 3 days. Prices include meals. No further breakdowns/options per day are available. Below please indicate which meals you plan to attend per day.

☐ **Thursday Only Price: \$75.00**

- ☐ I will be attending lunch
☐ I will be attending dinner

- ☐ I will not be attending lunch
☐ I will not be attending dinner

☐ **Friday Only Price: \$105.00**

- ☐ I will be attending breakfast
☐ I will be attending lunch
☐ I will be attending dinner

- ☐ I will not be attending breakfast
☐ I will not be attending lunch
☐ I will not be attending dinner

☐ **Saturday Only Price: \$35.00**

- ☐ I will be attending breakfast

- ☐ I will not be attending breakfast

☐ Vegetarian ☐ Gluten-free ☐ Vegan ☐ Diabetic I am allergic to _____

VENUE: The Holiday Inn Executive Center, 2200 I-70 Dr. SW, Columbia, MO 65203.
Phone: 573-445-8531 Website: <http://www.holidaycolumbia.com/>

HOTEL RESERVATIONS: Each person attending the 2016 CAG is responsible for making their own hotel reservation at the Holiday Inn. A discounted rate of \$102.95 per night, Wednesday through Friday during our event (plus tax), is available. Please use the hotel's local phone number listed above to make your reservation and mention "UCC". The discounted rate cannot be guaranteed if you call toll-free.

To make your reservation online at the discounted rate please visit: <http://goo.gl/545f7i>. If you do not use this specific link, the \$102.95 room rate will not be guaranteed. Once you click into the link, enter your dates of stay. Notice the block code (CJ6) is already loaded to receive the discounted rate - do not change or remove.

Click "Check Availability" and continue as instructed. You will receive a confirmation at the end of the process for your records. Please contact the Holiday Inn if you do not receive a confirmation.

If your family is interested in child care/programming at CAG, please email Kris at kris@mmsucc.org or call 314-918-2605 prior to Monday, May 23, 2016.

OPTION – Children's Meals (for all 3 days):

☐ \$60.00 per child, ages 2 - 11 for meals. (No cost age 2 and under)

1). Child's Name: _____ Age: _____ 2). Child's Name: _____ Age: _____

OPTION – Child Care: - will be provided at no cost for infants/toddlers/pre-schoolers up to age 4.

1). Child's Name: _____ Age: _____ 2). Child's Name: _____ Age: _____

OPTION – Children's Programming: - will be provided at no cost for children in kindergarten to 6th grade.

1). Child's Name: _____ Age: _____ 2). Child's Name: _____ Age: _____

Additional information we need to know about your child(ren), i.e. allergies, special needs, etc. Please be specific: _____

TOTAL amount enclosed or to be charged \$ _____

Method of Payment:

☐ I will be mailing a check to the Conference office -OR- my check is enclosed with form.

☐ [I will be paying online](#) – a completed registration **MUST** be sent to our Conference office to confirm your attendance. Your form may be faxed to 314-918-2610, emailed to [Kris](#), or mailed to our office: MMSUCC, 483 E. Lockwood Ave, Ste. 15, St. Louis, MO 63119.

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- Registration deadline is **Wednesday, June 1, 2016** – *Please* be respectful of this date. Meal counts need to be given to the hotel and we ask for your cooperation in registering early.
 - Payment for the 2016 Conference Annual Gathering must be received prior to your attendance in Columbia, MO.
 - Please call Renee Cordes at 314-918-2602 regarding CAG refunds.

Thank you, and we look forward to your attendance at our 2016 CAG!