Beautiful Life Registration Form WOMEN'S CONFERENCE Saturday April 1 2017

First Name	Notes:			
Last Name————				
Address (Line 1)——————				
Address (Line 2)—————				
City —				
State————	Advanced Tickets received by March 26th are \$25 (\$30 at the door)			
Phone #	Make checks payable to ARC Please complete one registration form per person.			
Email—————	Bring/send form & payment to:			
Dietary Request: Gluten Free Vegetarian Dairy Free	AMERICAN REFORMED CHURCH			

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Last Name	_
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Address (Line 2)	-
City	_
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	-
Phone #	-
Email	-
Dietary Request: Gluten Free Vegetarian Dairy Fre	e
Payment: ONLINE CASH CHECK	

If this is a Donation: Free Ticket Other—

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Notes:			

Beautiful Life Conferences

304 N. Fairview Drive

Luverne, MN 56156

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