



Augustana Heritage Association

Gathering VI Lindsborg, Kansas

Thursday - Sunday June 19 - 22, 2008

REGISTRATION for GATHERING VI

Please print.

Participant #1

Name: _____

Address: _____

City, State, Zip _____

Email: _____

Phone: _____

Cell Phone: _____

Dietary/medical/special needs: _____

Participant #2

Name: _____

Address: _____

City, State, Zip _____

Email: _____

Phone: _____

Cell Phone: _____

Dietary/medical/special needs: _____

Attach a separate sheet for additional participants

CONFERENCE REGISTRATION (see description on next page)

- | | | |
|---------------------------------------------------------------------|------------------------------|--------------|
| <input type="checkbox"/> Postmarked by May 15, 2008 | \$175 x _____ participants = | Total: _____ |
| <input type="checkbox"/> Postmarked after May 15, 2008 | \$195 x _____ participants = | Total: _____ |
| <input type="checkbox"/> Events only registration (snacks/no meals) | \$ 95 x _____ participants = | Total: _____ |

HOUSING

- I/We will be staying **off-campus** and will make my/our own reservations.
 - Location and city _____
 - Please arrange **on-campus** housing at Bethany College for me/us.
I/We will need on-campus housing on [please check all the apply]
 - Thursday Friday Saturday
- | | | |
|---------------------------------------------------------------------------|------------------|--------------|
| <input type="checkbox"/> Single (one participant in room, not shared) | \$35/night/room | Total: _____ |
| <input type="checkbox"/> Double (two participants in room) | \$40/night/room | Total: _____ |
| <input type="checkbox"/> Reserving entire suite (one or two participants) | \$70/night/suite | Total: _____ |

Roommate or suitemate preference(s): _____

Mail completed registrations to:

Augustana Heritage Association
Bethany Lutheran Church
320 N. Main
Lindsborg, KS 67456

Payment to **Augustana Heritage Association** must accompany registration.

Total payment enclosed by check: _____

Payment charged to Visa, Mastercard, Discover

Card #: _____

Expiration Date: _____

Security code (last three digits on back of card) _____

Signature: _____

Don't forget to complete the reverse side of this form!!

Registration:

The registration fee includes all full-group and small-group sessions, program costs, Thursday evening meal, noon and evening meals on Friday and Saturday, Sunday noon meal, and all coffee/snack breaks. Events only registration includes all of the aforementioned except meals. No refunds will be given for meals not attended. No partial registration is available. Cancellations will be honored up to June 10, 2008 and all but \$25 will be refunded.

Off-campus Housing: See attached list. All reservations will be made by individual participants. Remember to mention Augustana Heritage Association when making reservations. Breakfast meals will be “on your own” for off-campus housing.

Lodging at Bethany College:

Lodging at Bethany College will be provided in the campus residence halls. Housing for the Gathering will be provided in suite-style residence halls; two rooms share one bathroom. Each room has two single beds. A pillow, blanket, bed linens, bath towel and washcloth will be provided. An entire suite may be reserved by a single registration (one participant or two participants) who do not want to share a bathroom but the cost will be \$70 per night for the whole suite.

Adequate on-campus housing is anticipated. Campus housing will be provided on a first-come, first-served basis. Bethany College will **not** provide alarm clocks, hair dryers, televisions, fans, radios, irons or ironing boards.

For those who stay on campus, a continental breakfast will be provided. For on-campus housing questions, please contact the Bethany College Office of Summer Programs at 785.227.3380, ext. 8158. Check-in for campus housing will be Thursday, June 19, 12:00 p.m. to 6:00 p.m. Check-out will be 9:00 a.m. to 11:00 a.m. and from 12:30 p.m. to 1:00 p.m. on the morning following your reservation date(s). If other arrangements need to be made for check-in or check-out, please call the number above. Location for checking-in and out will be at Messiah Lutheran Church.

Your Reunion Groups:

College: _____ Year: _____

College: _____ Year: _____

Seminary: _____ Year: _____

Seminary Chorus: _____ Year: _____

Church: _____ Location: _____

Caravaners: _____ Year: _____

Choir: soprano alto tenor bass

Other: _____

Would you be willing to help organize or host your reunion group? _____

Specify which interest group _____

As reunion groups are identified and formed, you will be notified as time permits. Reunion group events will be posted at registration.

Please provide additional names and addresses of those who may be interested in attending.
