



GROUP REGISTRATION FORM

If you need hotel accommodations, please visit: <https://resweb.passkey.com/go/restoringjoy>
Discounted Room Rates expire October 3, 2014

Select only one of the following:	<input type="checkbox"/> Full 2-Days <input type="checkbox"/> Single Day (Friday, 10/24) <input type="checkbox"/> Single Day (Saturday, 10/25)
Email Address:	
First Name & Last Name:	
Home Address:	
City, State, Zip Code:	
Phone Number:	
Any Dietary Restrictions?	
Please submit any questions you may have for the speakers and panelists:	
This conference will be a success for you, if:	

Credit card processing by mail: Complete registration form below

Please charge my Credit Card:	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover
Cardholder's First & Last Name:	
Credit Card Billing Address:	
Credit Card Number:	
Expiration Date & CVV or CID Code	(mmyy) _____ (3-4 digit verification code) _____
Total Paid:	\$ _____.
Cardholder's Signature:	

Check Payment by mail

My check is enclosed and made payable to Restoring Joy to Leadership.	<input type="checkbox"/> YES
Mail Checks with <u>COMPLETED REGISTRATION FORMS (one/person) TOGETHER</u> in same envelope to: Restoring Joy to Leadership, LLC - 10109 Vineyard Lake Road E, Jacksonville FL 32256 **If registrations/payment sent separate, group discount will not be applied**	