



Alpha

REGISTRATION FORM

(Course begins Tuesday, Sept. 20, 2011)

Please fill in this form to let us know you are planning to attend.
Thank you!

NAME _____

ADDRESS _____

_____ PC _____

PHONE: _____ E-MAIL _____

It would be helpful if you would give us an idea of your age ...

____ 20's ____ 30's ____ 40's ____ 50's ____ 60+

Are you attending with another person(s)? Yes ____ No ____

If yes, please give names(s), so that arrangements can be made for you to sit together.

Any food allergies/special dietary needs (e.g. vegetarian, avoidance of pork products)? _____

Do you need Childcare? _____

Children's names and ages _____

We look forward to seeing you at Alpha Sept. 20 at 6:30 p.m.

Registration can be phoned in to 604-519-0123 or
you can check the website at
www.bethanybaptist.bc.ca/ministries/alpha



Alpha

REGISTRATION FORM

(Course begins Tuesday, Sept. 20, 2011)

Please fill in this form to let us know you are planning to attend.
Thank you!

NAME _____

ADDRESS _____

_____ PC _____

PHONE: _____ E-MAIL _____

It would be helpful if you would give us an idea of your age ...

____ 20's ____ 30's ____ 40's ____ 50's ____ 60+

Are you attending with another person(s)? Yes ____ No ____

If yes, please give names(s), so that arrangements can be made for you to sit together.

Any food allergies/special dietary needs (e.g. vegetarian, avoidance of pork products)? _____

Do you need Childcare? _____

Children's names and ages _____

We look forward to seeing you at Alpha Sept. 20 at 6:30 p.m.

Registration can be phoned in to 604-519-0123 or
you can check the website at
www.bethanybaptist.bc.ca/ministries/alpha