Illinois District Council Christian Education Association's
Delegates Registration Form (Please Print Names)

Church _____ Quarter

Pastor _____ ___ 1___2 ___3___4

Superintendents Name _____

Telephone_____ Fax _____ Email _____

IDCCEA

Quarterly Delegate Registration (please print or type)

_____ 20____

Children 12 and under $.50 Ages 13 thru 17 $1.00 Seniors $1.00 Adults $3.00

No.	Name	Child	Teens	Seniors (65 +)	Adults
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

Total Child Registration (this page only) $ _____ No. ( )

Total Teen Registration $ _____No. ( )

Total Senior Registration $ _____ No. ( )

Total Adult Registration $ _____No. ( )

Total Registration (this page only) $ _____No. ( )