



**October 15-17, 2004**  
**Walter & June Wink**  
**"The Powers that Be"**  
**\*\*Registration Form\*\***

**I / We would like to register \_\_\_\_\_ person(s) for Saturday's workshop 9am-3pm. The fee of \$25 per person includes lunch.**

**Name\*** \_\_\_\_\_ **Phone:** ( ) \_\_\_\_\_  
 (Please PRINT)

Street Address: \_\_\_\_\_ Email: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

\*Please also provide the names of additional registrants for name tags.

\_\_\_\_\_  
 \_\_\_\_\_

**Total enclosed:** \$ \_\_\_\_\_ (checks payable to First United Methodist Church, memo: Wink)

**Childcare will only be provided if requested before October 1. Please call the church office (630) 968-7120 to sign up for babysitting.**

How did you hear about this program?

(check all that apply)

- \_\_\_\_\_ word of mouth                      \_\_\_\_\_ UM Reporter
- \_\_\_\_\_ your local church                      \_\_\_\_\_ District newsletter
- \_\_\_\_\_ direct mailing or email                      \_\_\_\_\_ web
- \_\_\_\_\_ other \_\_\_\_\_

**Return completed form to:** First United Methodist Church, Attn: WINK  
 1032 Maple Ave., Downers Grove, IL60515

*Questions? Contact FUMC at (630) 968-7120 or [dgfumc@dgfumc.org](mailto:dgfumc@dgfumc.org)*

<p><b>For Office Use Only</b></p> <p>Paid: Cash _____</p> <p>Check # _____</p>
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