***2025 United Methodist Men Spiritual Congress Sept. 12-14***

***FORGED BY GRACE***

**Registrations Due Sept. 5**

*(COMPLETED FORM REQUIRED FOR EACH ATTENDEE)*

|  |  |  |
| --- | --- | --- |
| **Name:** | | |
| **Address:** | | |
| **City:** | | |
| **State:** | | |
| **Zip:** | | |
| **Phone:** | | |
| **Email:** | | |
| **Local Church & Town:** | | |
| **District (if known):** | | |
| **Attendance (Circle applicable rate)** |  | |
| **Friday-Sunday** |  | **$225** |
| **Friday** & **Saturday** |  | **$195** |
| **Saturday** & **Sunday** |  | **$195** |
| **Saturday Only** | • | **$135** |
| **Amount Enclosed:** | | |
|  | | |
| **Check Number and Date:** | | |
| **Make checks payable to *NIC-UMM*** | | |
| · I require handicap accessible lodging  I have special dietary requirements. Please specify:  "' | | |

### **Please mail this completed form with your check,**

### **PAYABLE TO NIC-UMM,** **to:**

**DALE CARVER**

**10543 W. 154th PLACE ORLAND PARK, IL 60462**

**Email:** [**spiritualcongress2025@gmail.com**](mailto:spiritualcongress2025@gmail.com)

**Cell Phone: (762) 218-7657**