

Northern Illinois District – North & West Fall Pastors' Conference  
Lake Lawn Resort, Delavan, Wisconsin  
**Tuesday & Wednesday** | October 10-11, 2017  
Exhibitor Registration Form

**Name and Contact Information**

Exhibitor/Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Name of representative attending: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Attendance (Check all that apply)**

- Yes** - I will be attending the conference (please complete Cost and Meals below)
- Yes** - I have reserved a hotel room at Lake Lawn Resort - [www.lakelawnresort.com](http://www.lakelawnresort.com)  
1-800-338-5253 (Reserve your room by Sept. 29, 2017 to get the group rate)
- No** - I am unable to attend the conference.

**Cost (Please indicate the number of each required)**

\_\_\_\_\_ **\$55.00** Exhibitor Registration - one table and two chairs

**please check if you definitely need an electrical hookup**

\_\_\_\_\_ **\$15.00** Extra table and two chairs

\_\_\_\_\_ **\$45.00** Meal Package *per person* - Includes Tues.. breakfast & lunch, Wed.. breakfast

Additional Names of representatives: \_\_\_\_\_

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**\$ \_\_\_\_\_ Total Amount Included With Registration Form**

To assist in appropriate planning for meals, please circle which meals you intend to receive. (Please note that the price of registration is the same regardless of the meals you select.)

Tuesday, October 10: Breakfast Lunch | Wednesday, October 11: Breakfast

**Please make check payable to: West Region**

Return completed registration form and payment by **Friday, September 29, 2017** to:

Attn: Conference Registrar, Rev. Matt Hoffmann  
St. Andrews Lutheran Church, 260 N Northwest Highway, Park Ridge, IL 60068