



Protestant Women of the Chapel
2011 Central Region Conference

Registration Instructions

Please **print** all information clearly and double check your information. The information you provide will be used to contact you and will be used on any personalized conference material (ie. your nametag).

1. Registrant Information. Name and contact information is used to print your nametags and contact you. If you do not have an email address, inform your Local Conference POC.
2. Special Needs. List any medical needs, dietary needs or requests for PWOC and the hotel.
3. Installation. Enter your installation name.
4. Emergency Contact. Provide the name and contact information to use in the event of an emergency.
5. Checkboxes. Check any of the boxes that apply to you.
6. Service Branch. Select appropriate branch of service.
7. Room Type. Check the appropriate room type and roommate preference.



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About you

Name _____
 Address _____
 City, State Zip _____
 Home Phone _____ Cell _____
 Email _____
 Special Needs _____
 Installation _____

Emergency Contact

Contact Name _____
 Phone 1 _____ Phone 2 _____

Additional Information (check all that apply)

- I'm a Workshop leader
- I'm a Conference Worship Leader/Band
- I'm a PWOCI Board Member, Position: _____
- I'm a Chaplain
- I'm a Chaplain's wife and will room with my husband
- Local PWOC Board, Position: _____

CIRCLE branch of service active duty / retired member represents
 Army / Navy / Air Force / Marines / Coast Guard / Army Reserve /
 Air National Guard / Other: _____

Room Type: Quad / Triple / Double / Single

Roommate Preference:

