



PK'S OFFICIAL REGISTRATION FORM

International Association of Ministers' Wives and Ministers' Widows, Incorporated

Dr. Margaret Brown Payton, International President

1 REGISTRATION INFORMATION (Please print legibly or type)

(Ages 5-15)

Please submit by April 30

The original intent of the PK Program was to provide an opportunity for young Ministers' Wives and Ministers' Widow to attend their classes. This service is extended to grandparent wives and widows who are assuming the primary parenting role.

Name _____ Phone _____

Address _____ Email _____

City _____ State _____ Zip Code _____

Mother's Name _____ Name of Mother's Local Association _____

Church _____ Denomination (Be specific) _____

Pastor's Name _____ Pastor's Wife Name _____

() Check here if this is the first IAMWMW Convention you have attended. Convention City _____

Date _____

Date of Birth _____

Please check if applicable: Young Adult (age not required) _____

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FEES

1. PK Registration \$ 75.00 _____

(Includes bus transportation to trips, convention supplies and materials)

DRESS CODE: no halter tops, no tank tops, no flip flops, no offensive attire

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FORMS OF PAYMENT ACCEPTED (MAIL-IN OR ON-SITE)

IAMWMW OFFICE USE ONLY

ORGANIZATIONAL CHECK, CASHIER'S CHECK, MONEY ORDER

CASH (On-Site Only)

PAYABLE TO: IAMWMW

SEND TO: Dr. Loretta H. Dennis

3925 River Bluffs Place

Richmond, VA 23223

NO PERSONAL CHECKS

Date Received _____ Total \$ _____

Method of Payment: Cash _____ Credit Card _____

Money Order # _____ Organization Check # _____

Cashier Check # _____

Receipt # _____