



# King's Apostle Church World Ministries, Inc.

Thursday, March 21 – Friday, March 22, 2019

## Leadership Summit 2019 Registration

<http://www.kingsapostleonline.org>

Phone: (410) 266-7946 ♦ Fax: (304) 724-8961

Full Name <i>Mr. Mrs. Ms. Deacon Elder, Bishop, Apostle</i>	<b>Please Print</b>
Street Address, City, State, Zip	
Phone Number	
Church Name and Pastor	
Church Address	

<b>Additional Registrants</b>		<b>Please Print</b>
Name		
Name		

### Payment Category

**Early Registration Received Through 3/15/19**

\$125.00 Per person (includes Friday Lunch)

**Late and Onsite Registration Received After 3/15/19**

\$150.00 Per person (does not include lunch)

**Make Checks Payable to: K.A.C.W.M.**  
**Mail to: KACWM National Headquarters**  
Attn: Deacon Roslyn Porter  
P.O. Box 6298 • Annapolis, MD 21401

*Office Use Only*

Date Received: \_\_\_\_\_

Date Processed: \_\_\_\_\_

Processed By: \_\_\_\_\_

CC Authorization Number: \_\_\_\_\_


Check/MO No: \_\_\_\_\_

Amount \$ \_\_\_\_\_

**Fax Credit Card Authorization To:** (304) 724-8961 Attn: Deacon Roslyn Porter

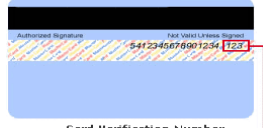
**Amount: \$** \_\_\_\_\_ **Name (As it appears on Credit Card):** \_\_\_\_\_

Credit Card Type: \_\_\_\_\_



Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_

Card Verification Number: \_\_\_\_\_

  
Card Verification Number: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Note:** If you are using a credit card, it is imperative that you sign and complete this form in its entirety.