National Adjutancy Academy 2015 REGISTRATION & ANNUAL MEMBERSHIP FORM

| • N | | Fax: | 1.866.266.9182 (secure) |
|---|--|--|--|
| | 1301 East Bay Street | The Web: Phone: | |
| Winter Garden, FL 34787Phone:407-656-5665Please note, if you registered in 2014, and your pictures were taken, once your registration form is signed and registration fees are paid, you will be pre-registered for the 2015 Academy. No lines, no waiting. In order to participate in "pre-registration" you must register either by mail, telephone, or the internet no later than May 29, 2015. If you use "telephone" registration or "on-line" registration, you must fax your signed registration form in order for your pre-registration to be complete! For questions, please call the Adjutancy Office at | | | |
| 2015 Registration Fees are as follows (Check One) LATE / ON SITE REGISTRATION & BADGE REPRINTS ARE AVAILABLE FOR AN ADDITIONAL \$25.00 FEE! | | | |
| Juris Nam | Brand new Adjutant - \$115.00 (This is my first tim Observer (I would like to observe the Academy and The Adjutant General's Love Gift (this is your of Adjutant Mother's Love Gift (this is your official New Adjutant Cord - (if you pre-register before May 29, 20 Personal Info | Williams and Mo Jurisdictional Bis a Pastor, Elder, N 15 l idid e in the Adjutanc d learn. I undersi fficial offering) - 1 offering) - \$10.0 015, you are eligible to rmation (P cer, Overseer, C | ther Miller for 2014) \$140.00 shop) \$140.00 Minister, Brother, Missionary or Sister) \$115.00 I not renew in 2014, but am seeking to renew for 2015 y) tand that I am not an adjutant, only an observer) \$65.00 \$20.00 00 b receive your cord in the mail) - \$40.00 Please Print): Chief Adjutant, etc) LAST NAME |
| | ng Address: | | |
| | | | ate: Zip: |
| | | Fa | ах: |
| Email Address: | | | |
| Jurisdictional Approval / Certification This section is to be completed for ALL ADJUTANTS, male and female | | | |
| Jurisdictional Bishop's Name: | | | |
| Jurisdictional Bishop's Signature: | | | |
| Local Pastor's Signature (if you are not a pastor) | | | |
| This section is REQUIRED for ALL FEMALE ADJUTANTS only Jurisdictional Supervisor's Name (Adjutant Sister's and Mothers Only): | | | |
| Jurisdictional Supervisor's Signature: | | | |
| Payment Information (please add your love gift for the Adjutant General and Adjutant Mother) METHOD OF PAYMENT: (Make Checks Payable: National Adjutancy) | | | |
| Che | ck Amount \$ Money Order Amou | nt \$ _ | Check / Money Order#: |
| Charge My: MasterCard Visa AMEX Card No: | | | |
| | | | Total amount authorized: |
| _ | ature: Credit Card Billing Zip Code: | | |