

# NATIONAL ADJUTANCY ACADEMY 2015

## REGISTRATION & ANNUAL MEMBERSHIP FORM (Winter Session)

If you wish to register for the 2015 Adjutancy Academy or RENEW your 2015 membership, please complete the following:

- |                                |                                                                                          |
|--------------------------------|------------------------------------------------------------------------------------------|
| ▪ Mail: <b>COGIC Adjutancy</b> | ▪ Fax: <b>1.866.266.9182 (secure)</b>                                                    |
| <b>1301 East Bay Street</b>    | ▪ The Web: <a href="http://www.cogic.org/adjutancy/">http://www.cogic.org/adjutancy/</a> |
| <b>Winter Garden, FL 34787</b> | ▪ Phone: <b>407-656-5665</b>                                                             |

Please 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. In order to participate in "pre-registration" you must register either by mail, telephone, or the internet no later than FRIDAY, OCTOBER 23, 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 407-656-5665. The Adjutancy Hotel is the Renaissance St. Louis Grand Hotel, 800 Washington Ave, St. Louis, MO - 314-621-9600. Register for housing through COGIC at [www.cogic.org](http://www.cogic.org). Registration will open on Tuesday, November 3th at 5:00pm, Sessions begin Wednesday, November 4th ending on Saturday, November 7. Sessions begin at 8:00am. (sessions are closed on Friday for Women/Men Day Observance)

### 2015 REGISTRATION FEES ARE AS FOLLOWS (CHECK ONE)

LATE / ON SITE REGISTRATION & BADGE REPRINTS ARE AVAILABLE FOR AN ADDITIONAL \$25.00 FEE!

- Certified Adjutant Overseer** (Designated by Bishop Williams for 2014) **\$165.00**
- Certified Adjutant Mother** (Designated by Bishop Williams and Mother Miller for 2014) **\$140.00**
- Chief Jurisdictional Adjutant** (Designated by the Jurisdictional Bishop ) **\$140.00**
- Returning & Renewing Adjutant** (Adjutant who is a Pastor, Elder, Minister, Brother, Missionary or Sister) **\$115.00**
  - I renewed in 2014 and am returning for 2015       I did not renew in 2014, but am seeking to renew for 2015
- Brand new Adjutant - \$115.00** (This is my first time in the Adjutancy)
- Observer** (I would like to observe the Academy and learn. I understand that I am not an adjutant, only an observer) **\$65.00**
- The Adjutant General's Love Gift (this is your official offering) - \$20.00**
- Adjutant Mother's Love Gift (this is your official offering) - \$10.00**

### PERSONAL INFORMATION (PLEASE PRINT):

Position in the Adjutancy (i.e., Adjutant Brother, Sister, Overseer, Chief Adjutant, etc...) \_\_\_\_\_

Jurisdiction: \_\_\_\_\_

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

TITLE	FIRST NAME	LAST NAME
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Address: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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)

Check Amount \$ \_\_\_\_\_ Money Order Amount \$ \_\_\_\_\_ Check / Money Order#: \_\_\_\_\_

Charge My:  MasterCard |  Visa |  AMEX      Card No: \_\_\_\_\_

Expires: \_\_\_\_\_ CVV (3 digit code) \_\_\_\_\_ **Total amount authorized: \_\_\_\_\_**

Signature: \_\_\_\_\_ Credit Card Billing Zip Code: \_\_\_\_\_