## Women's International Convention/Crusade COGIC

Mother Willie Mae Rivers, President Bishop Charles E. Blake, Sr., Presiding Bishop

P.O. Box 1052, Memphis, TN 38101 – Phone: 901-775-0600 – Fax: 901-775-5000

Official Housing Registration Form
If for some reason your roommate cancel or is a NO SHOW you will be responsible for the remaining balance of the room

	nce by checking one of the following (There Are	•	
, ,	ne Person-one bed)Double (Two P : Two Beds Are Limited – Please Choose Your R	g ,	
	Red Card Registration Fees - Rates are based on Doub	ole Occupancy	
DELEGATE: (PRINT CLEARLY) Bishop	Supervisor Natl Offcr Dist Missy	Mr Mrs Miss Ms Dr	
First Name:	MI Last Name:		
Street Address:		Apt. #	
City:	State:	Zip Code:	
Telephone:	Arrival Date: / / /	Departure Date: / / / /	
Supervisor's First Name:	Supervisor's Last Name:	Jurisdiction:	
Deposit: \$ Full Payment: \$	Email Address:		
METHOD OF PAYMENT: Cash Cashier/	Certified Check Money Order Master Card	☐ Visa ☐ AMEX ☐ Discover	
Credit Card Number:	Exp Date:	/ (Month/Year) Code:	
	Red Card Meal (Will Eat) 🔲 Breakfast 🔲 Lun	<u> </u>	
		Please attach a brief statement of specific needs.	
	A - \$35.00 Yes No - (Souvenir Journa		
	3 - \$25.00 Yes No - (Program Guide, 0		
SHARE WITH: (PRINT CLEARLY) Bishop Su	pervisor Natl Offcr Dist Missy	Mr Mrs Miss Ms Dr	
First Name:	MI Last Name:		
Street Address:		Apt. #	
City:	State:	Zip Code:	
Telephone:	Arrival Date: / / /	Departure Date: / / /	
Supervisor's First Name:	Supervisor's Last Name:	Jurisdiction:	
Deposit: \$Full Payment: \$	Email Address:		
METHOD OF PAYMENT: Cash Cashie	r/Certified Check Money Order Master Card	d Visa AMEX Discover	
Credit Card Number:	Exp Date:	_/(Month/Year) Code:	
	ed Card Meal (Will Eat) 🔲 Breakfast 🔲 Lui		
•	_if physically challenged or dietary restrictions. A - \$35.00 Yes No - (Souvenir Journa	Please attach a brief statement of specific needs.	
	B - \$25.00 Yes No - (Program Guide,		
	INICTALL MENT DAVMENT DI ANI		
Available with minimum deno	INSTALLMENT PAYMENT PLAN Disit of \$150.00 for each person. DEPOSITS NOT RE	•	
All Red Card Registration payments must be paid in full and received in the Convention Office on or before April 15th.			
	EQUEST FOR REFUNDS WILL BE ACCEPTED AF		
	TO: WOMEN'S INTERNATIONAL CONVENTION, I itional \$35.00 fee for all balances and new application		

Early Arrival or Extended Stay must be requested through your assigned Red Card Hotel (Pending Room Availability)

# THIRD DELEGATE IN THE ROOM PLEASE COMPLETE THIS SECTION SHARE WITH: (PRINT CLEARLY) Bishop \_\_\_\_ Supervisor \_\_\_\_ Natl Offcr \_\_\_\_ Dist Missy \_\_\_\_ Mr. \_\_\_ Mrs. \_\_\_ Miss \_\_\_ Ms. \_\_\_ Dr. \_\_\_\_ First Name: \_\_\_\_\_\_ MI \_\_\_\_\_ Last Name: \_\_\_\_\_ Apt. # Street Address: State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: Arrival Date: / / Departure Date: / / Supervisor's First Name: Supervisor's Last Name: Jurisdiction: Full Payment: \$ Email Address: METHOD OF PAYMENT: Cash Cashier/Certified Check Money Order Master Card Visa AMEX Discover Exp Date: \_\_\_\_\_/ \_\_\_\_(Month/Year) Code: \_\_\_\_\_ Credit Card Number: Red Card Meal (Will Eat) Breakfast Lunch Both Indicate by checking here if physically challenged or dietary restrictions. Please attach a brief statement of specific needs. Souvenir Journal: Packet A - \$35.00 \_\_\_\_\_\_ Yes \_\_\_\_\_ No - (Souvenir Journal, Program Guide, Convention Bag, etc.) Souvenir Journal: Packet B - \$25.00 Yes No - (Program Guide, Convention Bag, etc.) Please Pay with Registration

### The 2016 Red Card Registration Fees are as follows:

•	Delegates (Lay)	\$525.00
•	District Missionaries	\$550.00
	Assistant Supervisors	\$550.00
	Supervisors Without Charge	\$550.00
	National Leaders	\$550.00
•	Supervisors & Bishops	\$600.00

#### Rates above are per person based on Double Occupancy

Single Rate (One Person) Call The Red Card Office For Rate.

#### **Payment**

Credit Cards / Debit Cards, VISA, MasterCard, American Express and Discover are acceptable forms of payments. There is a \$5.00 dollar processing fee when any of the cards are used to make payments.

Please be advised that the Red Card Office is not responsible for checks or letters lost or delayed in the mail, or fax transmittals that are not received and/or not legible.

Note: If you fax your Housing Registration Form, do not mail the Housing Registration Form also. Doing so may result in duplicate charges to your credit card.

#### Cancellation

There is a \$150.00 NON-REFUNDABLE CANCELLATION FEE. If you need to cancel your registration, we must have your request in writing, accompanied by a physician's note or other documentation, along with the Red Card. In addition there will be an administrative fee of \$50.00 for all cancellations. Request for Refunds must be forwarded to the Women's International Convention, Post Office Box 1052. Memphis, Tennessee 38101 prior to May 13, 2016 or postmarked by May 23, 2016. Absolutely, no refunds will be honored without the return of the Red Card and documentation after this date.

All cancellations and refunds will be processed in the same manner as original payment: if paid by credit card the refund will be issued to the card on file. Payments made by cash/cashier check will be refunded as a check and may take up to 60 days to process, after the Convention.

#### **Housing Registration Form:**

If paying by credit cards/debit you can forward your registration form via e-mail, to **Redcardwic@att.net**, via fax or via postal mail to: Women's International Convention, Post Office Box 1052. Memphis, Tennessee 38101