Please return this form,	First Name:
along with your deposit to register for Step 1.	Last Name:
Return by Mail:	Contact Email:
Favored Women P.O. Box 2034	Contact Phone: Alternate:
Woodstock, GA 30188	Church Name:
Return by Fax:	Mailing / Street Address:
770-592-8239	Mailing / City:
	Mailing / State: Mailing / Zip:
DEPOSIT CALCULATION	OPTION ONE: One Step Registration Process NUMBER OF PARTICIPANTS x \$119 Per Person =
	OPTION TWO: Three Step Registration Process ESTIMATED NUMBER OF PARTICIPANTS = \$200
PAYMENT INFORMATION	Enclosed is a check to Favored Women for our total deposit above.
(including the cancellation an	ledge that you have read and understand the enclosed policies and information d refund policies) and that you agree to abide by them. You also authorize the above be charged for the registration deposits necessary to complete your registration.

Please note that a 3.9% convenience charge will be applied to all credit card transactions paid online, by phone, or in person.

Date:

Signature: