

Individual Registration Form

Name _____
Address _____ City/State/Zip _____
Phone _____ Email _____

Make checks payable and mail to: Associated Ministries 1224 S. I St., Tacoma, WA 98405

Individual Registration Costs

\$30 (before Feb. 21) \$40 (after Feb. 21)

Please charge the registration cost to:

MasterCard or VISA# _____ Exp. Date _____

Thank you for your participation. Associated Ministries values your privacy and will not sell or exchange addresses, phone numbers, or emails of our donors.

I would like a vegetarian meal Signature _____