

## Western Plains Church of the Brethren District Conference

July 31– August 2, 2015      McPherson, Kansas

### PLEASE READ BEFORE FILLING OUT REGISTRATION FORM

Dear 2015 District Conference Attendees,

In 2012 the District Conference Location Task Team recommended a number of suggestions for helping to ease the burden of those traveling longer distances to District Conference. The District Conference delegate body accepted these recommendations to be explored by the District Conference Planning Committee. In 2013 the Planning Committee implemented a registration and lodging subsidy on a trial basis for persons from congregations located further away from the District Conference location of McPherson, Kansas. The subsidy is being offered again for 2015. Please share on the conference evaluation forms your feedback regarding these changes. This will help the committee determine the effectiveness and sustainability of this approach and how we can continue to improve it.

Three “circle” areas have been designated in the district to determine to whom the subsidy will apply. **Please find a map on p. 2 that visually shows these circle areas and a list of the congregations in each area.**

- **Circle 1**—represents congregations/persons who travel a half-day maximum to get to conference. Conference attendees from these congregations will continue to pay full registration and lodging.
- **Circle 2**—represents congregations/persons who travel one day maximum to get to conference. The registration fee (\$35) will be waived for conference attendees from these congregations.
- **Circle 3**—represents the congregations/persons who travel two days maximum to get to conference. The registration fee AND dormitory lodging costs will be waived for conference attendees from these congregations.

**If you have any questions, please contact Kendra Flory in the District office.**

**wpdcb@sbcglobal.net**

**620-241-4240**

#### **Please Take Note....**

##### Registration

- There is a separate form for children’s activities & childcare. (There are NOT separate forms for youth.) Send all forms to **Wylene Lengel**: 1360 N Walnut St., McPherson, KS 67460, wylene.lengel@gmail.com
- Registration will take place in the gathering area of the church near the northwest entrance.

##### Lodging in Dotzour Hall...

- is an air-conditioned building. It is located near the church where the meetings are held and the cafeteria. The walk to breakout sessions is a little longer walk.
- has bathrooms that are shared with others on your floor.
- does **NOT** provide bedding or linens. **You need to bring all of your bedding (sheets, pillow, blankets), toiletries, towels, and washcloths.**
- does **NOT** have an elevator. If you cannot climb stairs, please indicate on the form that you need a room on the ground floor.

##### Meals

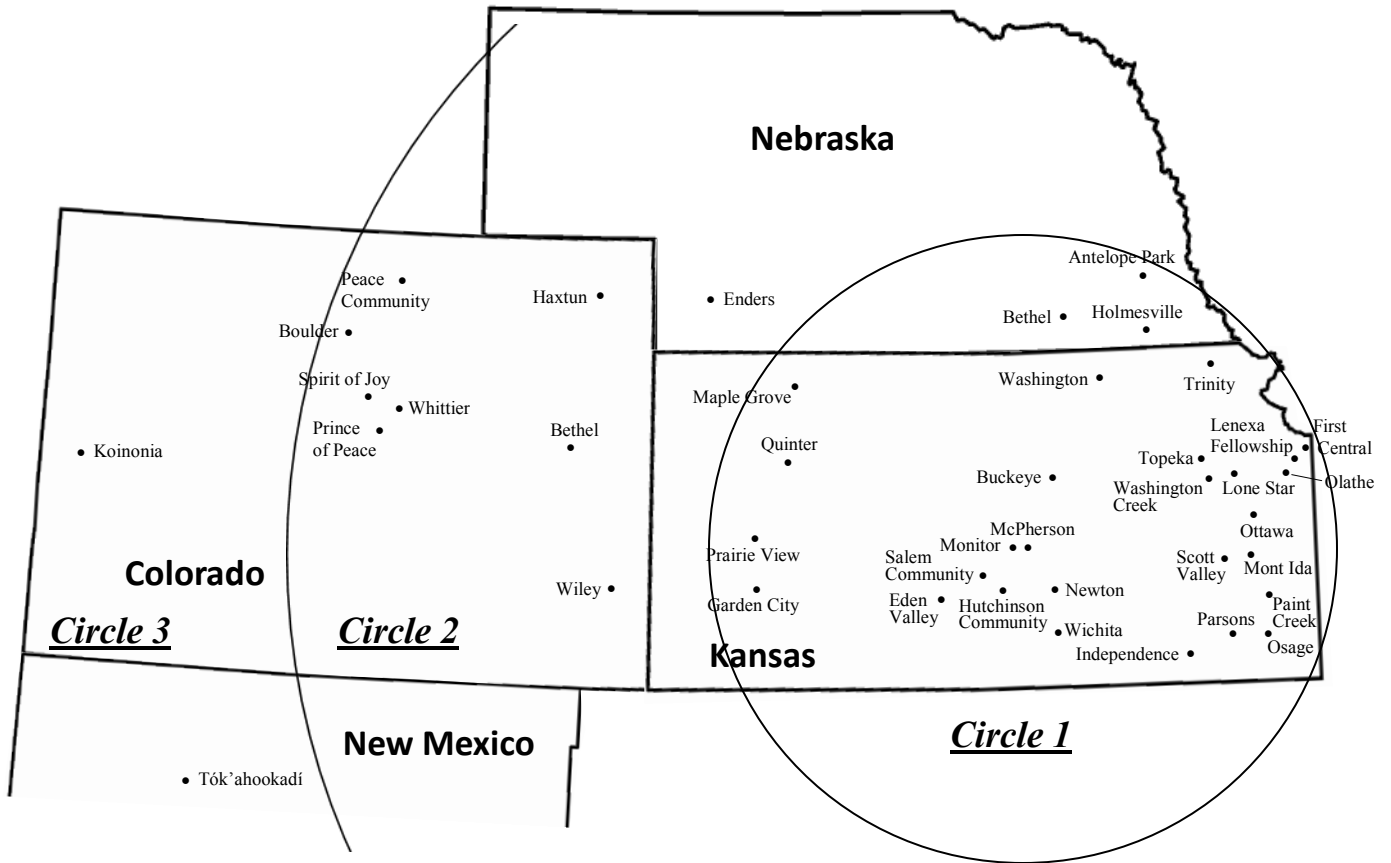
- The deadline to order meals is **July 13.**
- For special dietary and food allergies needs: please fill out p.2 of the registration form.

##### Transportation needs around campus

- Golf carts will be available to take people needing assistance to the breakout sessions and to meals. A count of persons is needed for this service. Please indicate on p. 2 of the registration form if you need this service.

**Call for help with children activities/childcare:** There is always a great need for volunteer help for any of the age groups. If you are willing to volunteer some time (even just a few hours!) for children activities or childcare, please fill out the appropriate section of the registration form on p. 2. Thanks so much for your consideration!

## District Conference Subsidy Map



### Circle 1

1/2 day drive maximum  
(0 to 223 miles; 0 min. to 4 hrs.)  
*No subsidies apply*

### Circle 2

1-day drive maximum  
(295 to 514 miles; 5 1/2 to 9 1/2 hrs.)  
*Registration fee waived*

- |                   |                  |
|-------------------|------------------|
| Antelope Park     | Olathe           |
| Bethel, Neb.      | Osage            |
| Buckeye           | Ottawa Community |
| Community (Hutch) | Paint Creek      |
| Eden Valley       | Parsons          |
| First Central     | Prairie View     |
| Garden City       | Quinter          |
| Holmesville       | Salem Community  |
| Independence      | Scott Valley     |
| Lenexa Fellowship | Topeka           |
| Lone Star         | Trinity          |
| McPherson         | Washington       |
| Maple Grove?      | Washington Creek |
| Monitor           | Wichita          |
| Mont Ida          |                  |
| Newton            |                  |

- Bethel, Colo.
- Boulder Fellowship
- Enders
- Haxtun
- Living Light of Peace Fellowship
- Peace Community
- Prince of Peace
- Whittier
- Wiley

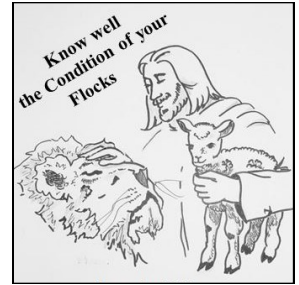
### Circle 3

2-day drive maximum (700+ miles, 13+ hrs.)  
*Registration fee and dormitory lodging waived*

- Koinonia
- Tok'ahookadi

**Western Plains Church of the Brethren District Conference**  
**July 31-August 2, 2015 McPherson Kansas**

Registration Deadline:  
July 13



**REGISTRATION FORM**

**List Adults Attending**

\_\_\_\_\_  
 \_\_\_\_\_

Are you an official delegate from your church?

Yes No  
 Yes No

**PLEASE NOTE**  
*subsidy information before filling out registration form*

**List Youth/Children Attending**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<u>Age</u>	<u>Grade completed</u>	<u>Youth Delegate</u>
_____	_____	Yes No
_____	_____	Yes No
_____	_____	Yes No

**Mailing address** \_\_\_\_\_  
**Phone ( )** \_\_\_\_\_ **E-mail** \_\_\_\_\_  
**Home Congregation** \_\_\_\_\_

**Registration Fee**

Maximum fee per family \$70

	<u># of persons</u>		<u>sub-total</u>
Adults:	_____	x \$35 = \$	_____
Adults (Sat. only):	_____	x \$25 = \$	_____
Youth/Children:	_____	x \$5 = \$	_____

**Fee Total: \$** \_\_\_\_\_  
*(Enter total at bottom of page)*

**Rooms** (Dotzour Hall)

Cost per night # of nights sub-total

Additional information:

Single occupancy: \$20 x \_\_\_\_\_ = \$ \_\_\_\_\_  
 \*Double occupancy: \$18/person x \_\_\_\_\_ = \$ \_\_\_\_\_

Circle nights room needed: *Thurs. Fri. Sat.*  
 Will you need a ground floor room? *Yes No*  
 Roommate(s), if not listed on this form: \_\_\_\_\_

\*Double Occ: Additional persons may sleep on the floor at no extra charge.

**Room Total: \$** \_\_\_\_\_  
*(Enter total at bottom of page)*

**Meals**

Cafeteria meals

(\$4 per child 6-10 yrs; free 0-5 yrs)

# of meals cost of meal sub-total

<i>In space provided, indicate # of persons per meal.</i>	<b>1. Children meals:</b>	<i>Thurs:</i> D___ <i>Fri:</i> B___ L___ D___ <i>Sat:</i> B___ L___ D___ <i>Sun:</i> B___ L___	_____ x \$4.00 = \$ _____
	<b>2. Breakfast:</b>	<i>Fri</i> ___ <i>Sat</i> ___ <i>Sun</i> ___	_____ x \$4.50 = \$ _____
	<b>3. Lunch:</b>	<i>Fri</i> ___ <i>Sat</i> ___ <i>Sun</i> ___	_____ x \$5.50 = \$ _____
	<b>4. Dinner:</b>	<i>Thurs</i> ___ <i>Fri</i> ___ <i>Sat</i> ___	_____ x \$7.00 = \$ _____
<b><u>Other meal events</u></b>	<b>5. Friday Evening: Minister/Guest Dinner</b>	_____	(no charge)
	<b>6. Saturday Morning: Women's Breakfast</b>	_____	x \$10.00 = \$ _____
	<b>7. Saturday Evening: Mission/Service Dinner</b>	_____	x \$12.00 = \$ _____

**Allergies & Special Dietary Needs:**  
 Please fill out p. 2 of this form.

*Women's Breakfast is \$10.00 for all ages.  
 Mission/Service Dinner is \$12 for all ages.*

**Meals Total: \$** \_\_\_\_\_  
*(Enter total at bottom of page)*

**Childcare Help/Special Needs**

I/We have filled out p.2 for:  
 Offering help with childcare/activities  
 Dietary/food allergy needs  
 Transportation needs  
 None of these

**Total Cost**

*Make checks payable to:*  
**Western Plains District Conference**

Fee Total: \$ \_\_\_\_\_  
 Room Total: \$ \_\_\_\_\_  
 Meals Total: \$ \_\_\_\_\_  
**Total Due: \$** \_\_\_\_\_

Please mail this form with payment to Wylene Lengel:  
**1360 N Walnut St.  
 McPherson, KS 67460**  
 wylene.lengel@gmail.com

**Call for help with children activities/childcare:** There is always a great need for volunteer help for any of the age groups. If you are available and willing to volunteer some time (even just a few hours!) for children activities or childcare, please give us your contact information and someone will be in touch with you. Thanks so much!

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Please indicate the timeframes with which you would be willing to help:

<u>Friday, July 31</u>	3:45 - 5:00 p.m. during business session	Yes	No
	5:00 – 7:00 p.m. during Minister Dinner	Yes	No
	7:00 - 8:30 p.m. worship (for infant to 4 years)	Yes	No
<u>Saturday, Aug. 1</u>	8:30 – 12:00 during business/insight sessions	Yes	No
	1:00 – 5:00 during business/insight sessions	Yes	No
	7:00 – 8:30 p.m. worship (for infant to 4 years)	Yes	No
<u>Sunday, Aug. 2</u>	Sunday School from 9:00 – 10:00 a.m.	Yes	No
	10:15 – 11:15 nursery care during worship	Yes	No

**I/We have food allergies and/or special dietary needs. Please list specific needs below.**

*When you arrive at District Conference and have completed the registration process, please contact Kendra Flory regarding your dietary needs. (The registration table will have her contact information.)*

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

Special Dietary Needs: \_\_\_\_\_

\_\_\_\_\_

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

Special Dietary Needs: \_\_\_\_\_

\_\_\_\_\_

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

Special Dietary Needs: \_\_\_\_\_

\_\_\_\_\_

**Golf cart transportation** will be available to take people needing assistance to the breakout sessions and meals. It is helpful to have a count of persons is needed for this service.

Please list the names of the persons needing transportation help around campus: \_\_\_\_\_

\_\_\_\_\_