

APPLICATION FORM

Genesis Seminars

Session 1: Sunday 2 November 2008
'The Caged Bird Sings' & 'Who do They Say that You Are?'

Session 2: Sunday 9 November 2008
'And God Said' & 'I Can Fly'

**Location: Chiswick Seventh-day Adventist Church,
Stamford Brook Road, LONDON W6 0XW**

Your Details

Surname:	First Name:	Mr/Mrs/Miss/Other:
Home Address:		Postcode:
Tel No:	Mobile:	Email:
Conference/Mission: <input type="checkbox"/> NEC <input type="checkbox"/> SEC <input type="checkbox"/> IM <input type="checkbox"/> SM <input type="checkbox"/> WM	Your Church Name:	Your Local Minister's Name:
How did you hear about this event?		Your age:

£40 total payment for the seminar must be sent in with the application form and must be received by 20 October 2008. Please make cheques payable to: **BUC** or call the Youth Dept on 01923 672251 for bank transfer details. Attendance on both days is required.

I have included full payment of £40 with this application form

Your Signature:	Date:
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Please post all forms and cheques to:
Youth Department, British Union Conference, Stanborough Park, Watford WD25 9JZ
Or email: bucyouth@adventist.org.uk