



# WALKING WITH THE SPIRIT

## REGISTRATION FORM

**Name** \_\_\_\_\_

**Organization** \_\_\_\_\_

**Address** \_\_\_\_\_

**City, State Zip Code** \_\_\_\_\_

**Country (if outside the US)** \_\_\_\_\_

**Email** \_\_\_\_\_

**Telephone** \_\_\_\_\_

**Choose your registration type:**

**USCMA Member** **\$ 325**

**Non-member** **\$ 475**

**Associate:** This registration option is for college students or young professionals who are attending the conference with a regular conference participant (sponsor). **\$ 160**

Sponsor's Name: \_\_\_\_\_

**Saturday Only:** This registration option only includes the Saturday events taking place on the University of the Incarnate Word's campus. **\$ 89**

**Additional Details:**

Name as you would like it for your badge \_\_\_\_\_

Organization you want on your badge \_\_\_\_\_

What role do you play in mission? *(Please select from the list the role you serve for the Mission of the Church)*

- |                 |                   |                                                   |                                          |
|-----------------|-------------------|---------------------------------------------------|------------------------------------------|
| <b>Student</b>  | <b>Missionary</b> | <b>Mission Council Member (Parish or Diocese)</b> |                                          |
| <b>Director</b> | <b>Leadership</b> | <b>Staff</b>                                      | <b>Supporter (Donor, Advocate, Alum)</b> |

**Breakout Sessions:** During the conference you may go to two different breakout sessions. Please select your top three choices by placing the number next to the title (e.g.: 1 for first choice):

- |                                                                             |                                                                        |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------|
| _____ Mission Spirituality Through Joy of the Gospel and Aparecida Document | _____ Transformation in Mission: Quién Soy Verdaderamente Para Servir? |
| _____ Mission in Contemplation                                              | _____ Missionary Church in Canon Law                                   |
| _____ Integral Development                                                  | _____ Restorative Justice                                              |

I would like to pay by  Check  Credit Card - number: \_\_\_\_\_ exp \_\_\_/\_\_\_  
Type: \_\_\_\_\_ security code: \_\_\_\_\_

Please mail your registration form and payment to:

**United States Catholic Mission Association**, 415 Michigan Ave. NE, Suite 102, Washington, DC 20017