

**ONE PERSON PER REGISTRATION FORM**

**REGISTRATION CLOSES ON MONDAY THE 31<sup>st</sup> AUGUST – THREE WEEKS BEFORE THE CONFERENCE**

**Seminar Topics:**

Please indicate which workshop you would prefer to attend during each of the 3 workshop sessions, by marking 1 and 2 and 3 at the relevant topic

- Fresh Expressions, Forgotten ways and Discovery Eph 4 ministries
- Mobilising your congregation for incarnational evangelism
- Working with small groups
- Strategising for the future
- Listening to your context
- The Order of Lay Ministries

**General Information: Please tick the appropriate box**

- Ordained Minister     
  Lay Leader     
  Married     
  Single  
 Male     
  Female

**PLEASE PRINT THE FOLLOWING INFORMATION:**

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: home(\_\_\_\_) \_\_\_\_\_ work( \_\_\_\_ ) \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ Church Name: \_\_\_\_\_

Church Address : \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Accommodation/Transport Information:**

Please tick the appropriate box where necessary

Accommodation is closed 3 weeks prior to the start of the Conference or when full. We can only provide accommodation if the information is complete and accurate. You will be accommodated at the eMseni Christian Centre which includes bedding and all meals.

Expected Date and Time of Arrival: \_\_\_\_\_

How will you be travelling (air/rail/road)? \_\_\_\_\_

If you need to be met on arrival, please give details of train/bus/plane: \_\_\_\_\_

Do you require accommodation at eMseni? YES  NO Do you wish to share accommodation with someone in particular? YES  NO 

If yes, name of person(s): \_\_\_\_\_

Any other information we should be aware of?

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**Conference Venue Details:**

eMseni Christian Retreat and Conference Centre  
MAP: see their website

Plot 61, Road No. 5, Brentwood Park, Benoni.  
Tel: 011 9735126

**[www.emsenichristiancentre.co.za](http://www.emsenichristiancentre.co.za)****Please return the completed registration forms to:**

Sheila Hunt  
M & D Secretary  
PO Box 70201  
Bryanston, 2021

Or

Cell: +27 82 854 9292  
Fax: +27 11 463 2984

Or

Email: [sheilahunt@tiscali.co.za](mailto:sheilahunt@tiscali.co.za)

Payments to be made out to:

DFH Consulting.

First National Bank.

Acc No. 62013675098

Branch Code: 250355.

Ref: Your name and M &amp; D Conference

Proof of payment to be sent to Sheila Hunt

BURSARIES:

Limited bursaries available for conference  
fee & accommodation, but NOT TRANSPORT