



MAY 8-10 AMITYVILLE, NY

When calling these hotels let them know that you are calling in reference to rooms reserved by the New York Ministry Network of the Assemblies of God.

HUNTINGTON HILTON

598 Broad Hollow Rd. Melville, NY
631.845.1000
Rate: \$179 (limited availability)
Cut Off Date: April 7

BEST WESTERN

5080 Sunrise HWY. Massapequa Park, NY
516.541.2000
Rate: \$112 (limited availability)
Cut Off Date: April 6

These hotels do not have specific rooms blocked off but are alternative options available nearby.

FOUR POINTS BY SHERATON

333 S. Service Rd. Plainview, NY
516.694.6500
Rate: \$179 (or best price)

COURTYARD BY MARRIOT

2 Marriot Plaza Farmingdale, NY
631.847.0010
Rate: \$239 (or best price)

TOWNEPLACE SUITES BY MARRIOT

1 Marriot Plaza Farmingdale, NY
631.454.0080
Rate: \$239 (or best price)

ACCOMMODATIONS

Mail the Registration Form & Payment to:
NY Ministry Network
8130 Oswego Rd. Liverpool, NY 13090

REGISTER & PAY ONLINE
NYMINISTRYNETWORK.ORG/HOPE2018

• Mail-in or online pre-registration NOT accepted after April 16 •
(ONLY on-site registration)

NETWORK CONFERENCE REGISTRATION FORM

May 8-10, 2018 Freedom Chapel, Amityville, NY

EVERYONE ATTENDING MUST REGISTER // Children 4 years & under may be listed on parent's form.

Please register only ONE person per form (duplicate form as needed). If you are ONLY attending evening services, you need NOT register or pay. If you are NOT a NY Ministry Network Credential Holder or Delegate, please register as a Visitor.

First Name

Last Name

Address

City/State/Zip

Phone

Email

Church

Church Location

Church Phone

I am a (please select all that apply):

Presbyter Missionary Exhibitor

Credential Holder \$75 (\$100 onsite) → \$ _____

I am credentialed with the NY Ministry Network (check one) Ord. Lic. Cert.

Delegate \$75 (\$100 onsite) → \$ _____

**Must complete Delegate Authorization form on reverse side*

Visitor \$25 (\$50 onsite) → \$ _____

If you are not a delegate or credential holder. Includes children ages 12+.

Visitor \$0 *Child age 5-11 years* → \$ 0.00

Missions Lunch on Wednesday \$15 → \$ _____

SubTotal A Amount Due \$ _____

Child Care (for children 4 years & under) Deaf Interpreter Needed

Pre-registration only; NO ON-SITE REGISTRATIONS.

Child care will be available during morning & evening services.

Cost is \$5 per child per service.

Multiply # of Services x \$5

<i>Child's Name</i>	<i>Age</i>		Tue PM	Wed AM	Thur AM	
Child's Name	Age	→	<input type="checkbox"/>	+	<input type="checkbox"/>	→ \$ _____
Child Two	Age	→	<input type="checkbox"/>	+	<input type="checkbox"/>	→ \$ _____
Child Three	Age	→	<input type="checkbox"/>	+	<input type="checkbox"/>	→ \$ _____
Child Four	Age	→	<input type="checkbox"/>	+	<input type="checkbox"/>	→ \$ _____

List Any Child Allergies

Add {

SubTotal B Amount Due \$ _____

SubTotal A Amount Due \$ _____

TOTAL AMOUNT DUE \$ _____

Children: Ages 0-4 yrs List child(ren) on parents form & pay only the fee for the time slots child care is utilized.

Ages 5-11 yrs Register as a VISITOR - no fee is charged.

Ages 12+ Register as a VISITOR and pay Visitor fee.

PRE-REGISTRATION DEADLINE: Mail must be postmarked by April 16, 2018 to receive discounted rates

Discount Codes can only be used online at: nyministrynetwork.org/2018hope



NETWORK CONFERENCE REGISTRATION FORM
May 8-10, 2018 Freedom Chapel, Amityville, NY

Select the "TED Talk" and/or Workshop you will attend.

"TED TALKS" & Workshops – MAY 9

2:00–3:00 pm (Choose One)

- LEADERSHIP "TED TALKS":** Developing the Leaders Around You
- LOCAL CHURCH "TED TALKS":** Creating Community Partnerships
- WORKSHOP:** Shepherding Emotional Health
With Jonathan Durst from Bedrock Counseling Ministries
- WORKSHOP:** Leveraging The Power of Partnerships
With Ron Showers from Convoy of Hope

3:15–4:15 pm (Choose One)

- LEADERSHIP "TED TALKS":** Leading With Limited Resources
- Local Church "TED TALKS":** Church Planting / Multi-Siting
- WORKSHOP:** Shepherding Emotional Health
With Jonathan Durst from Bedrock Counseling Ministries
- WORKSHOP:** Leveraging the Power of Partnerships
With Ron Showers from Convoy of Hope
- WOMEN IN MINISTRY TEA**

DELEGATE AUTHORIZATION FORM

This is to certify that _____ (delegate name) is a member of _____ (church name & location)
in the _____ (section) Section and has been appointed as a delegate to the NY Ministry Network
Conference, May 8 - 10, 2018, in Amityville, New York _____ (signature of pastor or church council secretary)

The voting membership of the NY Ministry Network Conference consists of all Credential holders & one delegate from each church (or two delegates if the church membership exceeds 100) who are present at the Network Conference and have signed the roster.

FOR OFFICE USE ONLY

Total Amount Due \$		
Cash \$	Date	
Personal Check \$	Date	chk#:
Church Check \$	Date	chk#:
Total Received \$	Date	