

Name(s) _____

Congregation _____

YES/ NO Delegate? _____ Display table needed? _____ Child Care Needed? Friday _____ Saturday _____

Dietary requirements (please specify)

Use back of form for any additional information

Amount enclosed _____ ***See the brochure for rates.***

Workshop preference (choose one in each session – see brochure for descriptions)

First Workshop Session

_____ What is the UUA and Where is it Going?

_____ One Congregation's Journey to Justice

Second Workshop Session

_____ The Power of We: Beyond the Gender Binary

_____ The Doctrine of Christian Discovery (DoCD)

Make check payable to NYSCU. Mail form and payment to: NYSCU, PO Box 428, Oneonta, NY 13820