



Diocese of Mid-America
 Anglican Province of America
Tenth Annual Synod Registration Form
National Shrine of Our Lady of the Snows
 442 S Demazenod Drive
 Belleville, IL 62223
 September 6th – 7th, 2019



Title: _____ Full Name: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Phone #'s: Home _____ Cell _____ Work _____

E-mail address: _____

Parish or Mission: _____

Address: _____

City: _____ State: _____ Zip Code: _____

House of Clergy: _____ Clergy _____ Bishop

House of Laity: _____ Delegate _____ Alternate _____ Observer

I hereby certify that _____ is duly elected as a

(name of Delegate or Alternate)

Delegate/ Alternate to the 2019 Mid-America Synod of _____

(check one)

(name of Church/Mission)

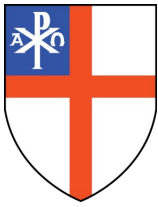
(city)

(Signature of Rector/Vicar/Clerk of Vestry)

Please mail this registration form with the registration fee of \$65.00 payable to “The Diocese of Mid-America” by Monday, July 5, 2019 to:

**Diocese of Mid-America
 20403 Encino Ledge, # 593375
 San Antonio, Texas 78259-9998**

Duplicate this form as needed for each delegate, alternate and observer. Registration fee includes dinner on Friday evening, followed by hospitality, and lunch on Saturday. Breakfast is provided by the hotel Friday and Saturday morning. All delegates, alternates and observers are required to pay the registration fee. Please select meal options on following page.



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Meal Options:

Friday Evening (Meal includes choice of one entrée with coffee/tea/lemonade, Shrine Salad, Roll, vegetable medley, red jacket potatoes, and dessert.)

Please select one option:

_____ Plated Chicken Henry

_____ Pork Tenderloin with Mushroom Demi Glaze

_____ Tilapia with Crab Stuffing

Saturday Lunch (Meal includes choice of one entrée with coffee/tea/lemonade, and fresh season fruit.)

Please select one option:

_____ Fried Cod Sandwich

_____ Chicken Salad Sandwich

_____ Club Croissant