



Registration Form

Name: _____

Address: _____

Phone: _____

Are you a regular attender or have a church home? Yes No

If yes, what is the name of your church? _____

Please make \$30 registration fee checks out to: Bonhomme Presbyterian Church.
(This fee includes lunch)

You may remit your payment with this form to:

Bonhomme Presbyterian Church
14820 Conway Road
Chesterfield, MO 63017