

**The Young People's Department  
of the Woman's Auxiliary to the  
National Baptist Convention, USA, Incorporated**

**Dr. Julius R. Scruggs,  
President, NBC, USA, Incorporated**

Mrs. Rhonda Mitchell  
Western Region Director  
825 North West 142  
Edmond, Oklahoma 73013  
[rjmitchell@gmail.com](mailto:rjmitchell@gmail.com)

**The Western Regional Youth Conference  
July 10 - 12, 2013  
Crowne Plaza (888-233-9527)  
2886 S. Circle Drive, Colorado Springs, CO 80906**

**Room Rates: \$109.00 for further information contact Director Mitchell  
Conference Registration Form**

Mrs. Katie Webb, Woman's Auxiliary Vice President  
Western Woman's Region Director

Dr. Marian Hockenull  
National YPD Director

Dr. Hugh Dell Gatewood  
President Woman's Auxiliary

PLEASE SUBMIT FORM AND FEES TO:

WOMAN'S AUXILIARY OFFICE  
P.O. BOX 16220

HOUSTON, TX 77222

Deadline: **June 18, 2013**

Money Orders or Cashier's Checks ONLY  
Payable to: "Woman's Auxiliary, NBC, USA, Inc."

(Memo: Western Regional YPD)"

**"No On-Site Registration"**

<b>CONTACT PERSON:</b>	_____
<b>State / Local Person:</b>	_____
<b>Address:</b>	_____
<b>City:</b>	_____
<b>State:</b>	_____
<b>Zip:</b>	_____
<b>Telephone Number:</b>	_____
<b>E-mail:</b>	_____
<b>Church Name:</b>	_____
<b>Pastor:</b>	_____
<b>State Convention:</b>	_____
<b>State Director:</b>	_____
<b>District Director:</b>	_____

**"Solidarity with the Savior Through His Works".**

*Matthew 5:16, John 10:32, Titus 2:14, Hebrews 13:21*

CONFERENCE REGISTRANT @ \$50.00	AGE	A	B	C	D	E	Each Person Total
Everyone must register (including staff, committees, teachers)							
Ex. Jamie Doe	\$50	12					\$50.00
1.							
2.							(see back)

**Total Registrants \_\_\_\_\_ x \$50 = \$ \_\_\_\_\_ "No On -Site Registrations"**

A. Total - Director's March \_\_\_\_\_ N/A

B. Total - Queen's Review \_\_\_\_\_ N/A

C. Total - Rose Pageant \_\_\_\_\_ N/A

D. Total - Scholarship \_\_\_\_\_ N/A

E. Total Number of Participants for "Rites of Passage" (Ages: \_\_\_\_\_ 3-5, \_\_\_\_\_ 6-8, \_\_\_\_\_ 9-11, \_\_\_\_\_ 12-14, \_\_\_\_\_ 15-18)

Total any other fees collected: \$ \_\_\_\_\_ (what are other fees for: \_\_\_\_\_)

Grand Total Amount Submitted \$ \_\_\_\_\_

**OFFICE USE ONLY**

Amount Received: \$ \_\_\_\_\_  Cashier's Check  Money Order  Cash

Date Received: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

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<b>Enter Totals on Page 1</b>								