

Victorious Christian Fellowship International, Inc.



Registration Form

7th Annual Holy Convocation July 16th – 20th 2024

Please use **CAPITAL LETTERS** or **TYPE** and return this form to:

Email: vcfim16@gmail.com
<http://www.vcfi.org>

Registration Details

Mr. Mrs Ms. Minister Elder Pastor Overseer Apostle Bishop

Family Name: Last Name:

Church/Ministry:

Address:

Zip code: City: State:

Phone: Fax:

Email:

Specific diet requirements (vegetarian, allergies) if applicable:

If you need any other specific facilities (wheelchair access), do not hesitate and contact us at: vcfiad16@gmail.com

Attention: Administration Department

Registration Fee's (Full Payment is requested by June 1st)

	Listed Clergy Member Apostles, Bishops, Overseers & Pastors	Elders/ Evangelist/ Ministers	Children 14 & under	Non - Clergy Members	Church / Ministry/ Fellowship Registration
Registration Fee	\$175	\$125	\$25	\$100	\$200
Pass Per Day / Per Person	\$75	\$50	\$10	\$25	N/A

Visitors: Bishops, Pastors, Apostles & Overseers: One Day Registration Pass: \$75
Visitors: Elders, Evangelist & Ministers: One Day Registration Pass: \$50
Visitors: Non-Clergy: One Day Registration Pass: \$25
Visitors: Children 14 & under One Day Registration Pass: \$10

Cancellation Policy

All cancellations must be in writing. Cancellations received before 1st May 2023 is subject to a charge of 50% of the registration fees for administrative costs. From 1 June 2023 on, full payment will be requested, and refunds will not be returned.

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Participant Registration Form

Way of Payment

All payments to be made to the order of Victorious Christian Fellowship International Inc.

- Pay Pal** vcfim16@gmail.com
- Cash App** \$VicFellowship
- Chase Zelle** vcfim16@gmail.com
- Cash**
- Checks** **Victorious Christian Fellowship International, Inc.**

<input type="checkbox"/> Credit Card:	<input type="checkbox"/> American Express	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
Cardholder:	Amount: +.....		
Card #:	Expiry date:	Security Code (CVC):	
Date:	Signature:		

For payments by Credit Card: The official invoice will be sent upon receipt of payment from the Credit Card operator.

Billing Information

Church / Ministry:

IF DIFFERENT FROM ABOVE:

Contact Person:

Address:

Zip code: City: Country:

Phone: Fax:

Email:

IMPORTANT: Hotel and travel reservations can be made through V.C.F.I. (vcfim16@gmail.com).

Data Protection Statement & Personality / Image Rights

By filling out the registration form, the participant gives consent that Victorious Christian Fellowship International Inc can process the data provided within the framework of the convocation and allow photographs to be made during the convocation. This includes, unless registered participants object, all handling needed for the applicant's participation at the event and for the drafting of a list of participants which will be distributed at the convocation and placing photographs in the picture's gallery accessible only by participants and VCFI member and in any other web/printed publication.

Right of access: applicants have a right to access and ask for changing or deleting their personal data, which will be kept by VCFI.

VCFI would like to contact you occasionally to keep you informed of future VCFI events and other relevant information. If you do not wish us to do this, please tick this box to be removed from our general distribution list

In His Name,

+ *Roberta E. Moore*

Bishop Roberta E. Moore
Chief Prelate

