



“...as we wait in joyful hope for the coming of the Lord.”

Event Registration Form and Agreement

Joyful Hope Presentations thanks you for this opportunity to serve Christ, you, and your organization.

Our presentation representative: \_\_\_\_\_

Location: Facility Name: \_\_\_\_\_  
Facility Address: \_\_\_\_\_  
Facility City: \_\_\_\_\_  
Facility State/Zip \_\_\_\_\_  
Your Phone #: \_\_\_\_\_

Day and Time: MM/DD/YY: \_\_\_\_\_  
From time/time \_\_\_\_\_ to \_\_\_\_\_

Purpose: For the presentation of a \_\_\_\_\_  
To your: \_\_\_\_\_  
Entitled: \_\_\_\_\_  
Relating to the theme/topic of \_\_\_\_\_  
The fee for this presentation is \$ \_\_\_\_\_.

Facilitator: Print your name: \_\_\_\_\_  
Your signature & date: \_\_\_\_\_

Please complete all of the above information, include a check made out to “Joyful Hope Presentations” for 50% of the entitled fee, sign, date, and return this form as soon as possible to the address shown below. All prearranged dates are held for only 30 days prior to receiving this confirmation form and deposit. The deposit is non-refundable unless you reschedule the event with us or we have to cancel our appearance.