



Texas Family Convention 2011

مؤتمر الأسرة - ولاية تكساس

November 23rd – 26th

“Spiritual House” 1pet.2:5

Application Form

Name of Applicant : _____

Name & age of other family members (same room):

1- _____

2- _____

3- _____

Home Address (العنوان) : _____

City: _____ State: _____ Zip: _____

Phone (التليفون): _____

Email: _____

Church Name (الكنيسة): _____

Emergency Contact Person (اسم للاتصال في حالة الطوارئ): _____

Contact Person's Phone (تليفون للاتصال في حالة الطوارئ): (____) _____ - _____

Any special circumstances regarding the participant (allergies, etc.):

(اي ظروف طبية خاصة مثل الحساسية)

Registration Fee (رسوم التسجيل): \$300 / family (up to 2 people with children under 12 years old...additional \$20 for each person 12 years and up)

(Including room, parking spot for one car, food basket (Thanksgiving Dinner is not included))

Please send Application Form and Registration Fee by **November 18th 2011** to the following address:

(عنوان المراسلة)

St. Philopateer Coptic Orthodox Church

1450 E. Campbell Road

Richardson, TX 75081