

NOTE: This is the mail-in form. If you prefer to register online, visit togetherwomen.net

PERSONAL INFORMATION

Name

Date _____

Home Address _____

Phone _____ E-Mail _____

Home Church / City, State _____ / _____

Group Leader Name / Email _____ / _____

CHOOSE AN EXPERIENCE

- MARCH 16 // CONNECT CHURCH, PORTSMOUTH NH (Postmarked by 3/2/24)
- MARCH 23 // CHURCH OF THE ROCK, ST. ALBANS VT (Postmarked by 3/9/24)
- APRIL 6 // COMMUNITY, LINCOLN ME (Postmarked by 3/23/24)
- APRIL 13 // KENNEBEC VALLEY, CHELSEA ME (Postmarked by 3/30/24)

COFFEE HOUR/ LUNCH

- Gluten Free Option, Please Dairy Free Option, Please

PAYMENT

- \$35 (on time) Registration (includes coffee hour & lunch)

TOTAL // \$ _____

Enclose CHECK made out to NNED

MAIL TO // NNED, 501 RIVERSIDE ST, PORTLAND MAINE 04103