



General Council Registration Form

Please indicate your *capacity of participation* in the Council:

- Participants
 - Delegate
 - Executive Committee member
 - Representative delegated by ecumenical bodies, etc.
 - Observer

- Staff
 - WCRC staff
 - Co-opted staff
 - Steward
 - Advisor
 - Worship committee member
 - Procedures team member
 - Language team member
 - Communications team member

- Other
 - Speaker
 - Visitor
 - Youth gathering participant
 - GIT participant
 - Accredited journalist

Please provide **ALL** of the requested information below:

Name

Title: _____
First Name: _____
Last Name: _____
Preferred name: _____

Contact Information

Street: _____
City: _____
State/Province: _____
Zip/Postal Code: _____
Country: _____
Telephone (home) - indicate country and city codes for telephone:

Telephone (work) - indicate country and city codes for telephone:

Telephone (mobile) - indicate country and city codes for telephone:

Fax- indicate country and city codes for telephone:

Email (professional): _____

Email (private): _____

Representation

Name of the church: _____

Church status (choose one): ordained or lay

Profession: _____

Position in church or organization: _____

Emergency contact

Emergency contact name: _____

Emergency contact telephone: _____

Passport information

Confirm that your passport is valid for 6 months after General Council: Yes or No

Passport nationality: _____

Full name as in passport: _____

Passport number: _____

Place of issue: _____

Date of issue (dd/mm/yyyy): _____

Valid until (dd/mm/yyyy): _____

Personal information

Date of birth (dd/mm/yyyy): _____

Country of birth: _____

Gender: female or male

Marital status (for insurance purposes): Single or Married

Special consideration/special need

Do you require a special accommodation or have a special need? Yes or No

Describe your special accommodation or special need:

Describe any dietary requirement, preference or allergy:

Please check if you want special meals: Vegetarian

Language

Mother tongue: _____

Foreign language skills - check ALL languages that you speak:

English French German Indonesian Korean Spanish

Preferred language to receive documents:

English French German Indonesian Korean Spanish

Bible Study participation - check your preferred language:

English French German Indonesian Korean Spanish

Dialogue group participation - check ALL languages you feel comfortable with:

- English French German Indonesian Korean Spanish

Pre-events

Do you have interest in any pre-event:

- Interest in women's pre-council (June 26-28)
 Interest in youth pre-council (June 26-28 - age limit: 18-30)
 Interest in youth gathering (June 23-28 - age limit: 18-30)

Lodging accommodations

Please indicate your preference:

- self-payer and want to instruct the WCRC to book a hotel room for you
 self-payer and will book hotel accommodations yourself
 applied for reimbursement of your travel and accommodation expenses (please refer to the WCRC's reimbursement policy for details)

If you are a self-payer and instruct the WCRC to book your hotel choose room type:

- Single room
 Double room
 Twin room

If you are a self-payer and instruct the WCRC to book your hotel choose room fee:

- 80-120 Euro
 121-200 Euro
 201-300 Euro

Travel

Please indicate whether you:

- are a self-payer and want to instruct the WCRC to book your travel to Leipzig for you
 are a self-payer and will book your tickets yourself
 applied for reimbursement of your travel and accommodations expenses (please refer to the WCRC's reimbursement policy for details)

Anticipated arrival date: _____

Anticipated departure date: _____

Please email this completed and saved form to: registration@wrc.eu

OR

Fax the completed form to: +49 511 8973 8311

OR

**Mail the completed form to:
General Council Registration
World Communion of Reformed Churches
Knochenhauerstr. 42
30159 Hannover, Germany**