

**2023 FCM FIVE-FOLD MINISTRY AND BELIEVERS CONFERENCE**  
**July 19-22, 2023**

The following hotel is offering a special rate so please let them know you are part of the *Faith Covenant Ministries* conference:

**Holiday Inn Cherry Hill**  
2175 Marlton Pike Rd.  
Cherry Hill, NJ 08002  
**(856) 663-5300**

Executive Double or Executive King **\$119.00**

For reservations, guests can call **(856) 663-5300** and ask for the “Faith Covenant Ministries” rate. Or you can Book

Online: <https://www.holidayinn.com/redirect?path=rates&brandCode=HI&localeCode=en&regionCode=1&hotelCode=CHHNJ&checkInDate=17&checkInMonthYear=062023&checkOutDate=23&checkOutMonthYear=062023&PMID=99801505&GPC=COV&cn=no&viewfullsite=true>

The **cut-off date is June 16<sup>th</sup>** so call for reservations as soon as possible.

**SPECIAL CONFERENCE DISCOUNT if you register by April 1<sup>st</sup> of 15% deducted from total.**

The cost of the conference is \$129.00 per person, \$154.00 per couple if registered prior to June 1<sup>st</sup>. After June 1<sup>st</sup>, cost is \$154.00 per person, \$179.00 per couple. One-day registration will be half of the cost. Two or more days will be full price. Youth (12 and older) is \$69.00 per person. For those who participate in serving, the cost is \$94.00 per person, \$114.00 per couple (if both serving) before June 1<sup>st</sup>, or \$109.00 per person or \$129.00 per couple (if both serving) after that date. At the door, cost will be \$179.00 per person, \$219.00 per couple. Fill in the registration form and return it, with the fee to:

**Faith Covenant Ministries, 24 Whalen Avenue, Sicklerville, NJ 08081** . Evening services are FREE and open to the public.

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Registration

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

What church do you attend? \_\_\_\_\_

Name of other people attending (In the case of youth, please include age; for children, please include age, allergies).

Name	Age	Allergies
_____		
_____		
_____		
_____		

Number registered \_\_\_\_\_ Singles @ \_\_\_\_\_ = \_\_\_\_\_

\_\_\_\_\_ Couples @ \_\_\_\_\_ = \_\_\_\_\_

\_\_\_\_\_ Youth @ \$69.00 = \_\_\_\_\_

TOTAL \_\_\_\_\_

**If registering before April 1<sup>st</sup>, subtract 15% off total** \_\_\_\_\_

TOTAL \_\_\_\_\_

If serving, please list the area(s) and time(s) you are serving: \_\_\_\_\_

Make checks payable to “FCM” or pay by credit card AX \_\_\_\_\_ Visa \_\_\_\_\_ MC \_\_\_\_\_

Card # \_\_\_\_\_ Expiration date \_\_\_\_\_ Security Code \_\_\_\_\_

Name as it appears on the card \_\_\_\_\_ Signature \_\_\_\_\_

You may fax the form in if you are using a credit card. Fill out information and fax to: 856-401-1233.