



**MT. BETHEL BAPTIST ASSOCIATION**  
**WOMEN IN MINISTRY AUXILIARY**  
**WOMEN EMPOWERMENT CONFERENCE**  
**Oct. 11, 2025**

**REGISTRATION FORM**

**Full Name:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Organization (if applicable):** \_\_\_\_\_  
**Social Media/Website (optional):** \_\_\_\_\_

**Registration Fee Details**

☒ **Registration Fee: \$25.00 (Non-Refundable)**

☒ **Accepted Payment Methods:**

✓ **Zelle:** Send payment to [florainecunningham@gmail.com](mailto:florainecunningham@gmail.com) (**Mt. Bethel Baptist Association**) **Include Message:** *Women in Ministry Auxiliary – Women Empowerment Conference*

✓ **Givelify:** Search for **Mt. Bethel Baptist Association** and submit payment (*Include the message: "Women in Ministry Auxiliary – Women Empowerment Conference"*)

 **Givelify Processing Fee:** Payments made via Givelify will incur a **2.9% + \$0.30** transaction fee.

 **Send completed registration form to:** [rosalynam@gmail.outlook.com](mailto:rosalynam@gmail.outlook.com)

**Additional Information**

- ◆ **Would you like to receive event updates via email? (Yes/No)**
- ◆ **What do you hope to gain from this event?** \_\_\_\_\_

**Registrant Agreement:**

I agree to attend the Women Empowerment Gathering and understand that my **registration fee is non-refundable**. I acknowledge that event details will be provided before the event date.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_