

2010 Group Registration **Celebrate!**

Meals & hotel accommodations are not included in the conference registration fee

We encourage group registrations by offering couples a registration discount of \$10 per person. Discounted rates are listed below. To qualify as a group, submit registrations for five or more couples any time up to 30 days prior to the conference. **Group reservations will be accepted within 30 days of the event based on space availability.** Group must attend the same conference date.

Group registrations may be purchased at a discount in advance without specific names but are non-refundable. For information call 989-466-5574 or visit us online at www.jayandlaura.com.

ASHEVILLE, NC:

_____ APRIL 18, 2010 - APRIL 19, 2010
 \$49/PERSON UNTIL 2/28/09
 \$59/PERSON AFTER 2/28/09

MACKINAC ISLAND, MI MAY, 2010:

_____ MAY 16-17 _____ MAY 17-18
 \$49/PERSON UNTIL 2/28/09
 \$59/PERSON AFTER 2/28/09

MACKINAC ISLAND, MI OCTOBER, 2010:

_____ OCT 10-11 _____ OCT 11-12
 \$49/PERSON UNTIL 8/31/09
 \$59/PERSON AFTER 8/31/09

PLEASE INDICATE COUPLES ADDING THE \$30 MEMORABILIA PACKAGE:

- **TWO 2010 CELEBRATE WITH JAY & LAURA T-SHIRTS**
- **ONE 8 SESSION DVD: CELEBRATE YOUR MARRIAGE VIDEO SERIES**
- **TWO GUIDE BOOKS: CELEBRATE YOUR MARRIAGE VIDEO SERIES**

Include completed registration form and method of payment for each couple.

Group registrations are not available online. **TO QUALIFY FOR GROUP RATE ALL REGISTRATIONS MUST BE SUBMITTED AT ONE TIME BY GROUP LEADER.**

PLEASE FAX TO: 989-466-5185 OR MAIL TO: PO BOX 93, ALMA, MI 48801

GROUP LEADER: _____

EMAIL ADDRESS: _____

DAYTIME PHONE: _____

**TICKETS ARE NON-REFUNDABLE
 PLEASE MAKE COPIES IF NEEDED**

COUPLE #1 ___ Check enclosed OR Visa MC AMEX Discover Expiration ___/___
 Card # _____ CVV Code _____ OR
 eCheck Bank Name _____ Checking/Savings/Business Checking
 Routing # _____ Account # _____

Name on Account _____
 Street Address _____
 City _____ State _____ Zip _____
 Daytime Phone _____ E-mail Address _____

COUPLE #2 ___ Check enclosed OR Visa MC AMEX Discover Expiration ___/___
 Card # _____ CVV Code _____ OR
 eCheck Bank Name _____ Checking/Savings/Business Checking
 Routing # _____ Account # _____

Name on Account _____
 Street Address _____
 City _____ State _____ Zip _____
 Daytime Phone _____ E-mail Address _____

COUPLE #3 ___ Check enclosed OR Visa MC AMEX Discover Expiration ___/___
 Card # _____ CVV Code _____ OR
 eCheck Bank Name _____ Checking/Savings/Business Checking
 Routing # _____ Account # _____

Name on Account _____
 Street Address _____
 City _____ State _____ Zip _____
 Daytime Phone _____ E-mail Address _____

COUPLE #4 ___ Check enclosed OR Visa MC AMEX Discover Expiration ___/___
 Card # _____ CVV Code _____ OR
 eCheck Bank Name _____ Checking/Savings/Business Checking
 Routing # _____ Account # _____

Name on Account _____
 Street Address _____
 City _____ State _____ Zip _____
 Daytime Phone _____ E-mail Address _____

COUPLE #5 ___ Check enclosed OR Visa MC AMEX Discover Expiration ___/___
 Card # _____ CVV Code _____ OR
 eCheck Bank Name _____ Checking/Savings/Business Checking
 Routing # _____ Account # _____

Name on Account _____
 Street Address _____
 City _____ State _____ Zip _____
 Daytime Phone _____ E-mail Address _____