

FAMICOM Comes to New Hope! Fri Sat Sun March 3/6-8

Jim Boothby
February 28, 2020

Dear Members,

REGISTER FOR FAMICOM

**FAMICOM COMES TO NEW HOPE!
NO NEED FOR LAS VEGAS ...ALL THE BENEFITS ARE COMING HERE!
FOR ALL NHFC MEMBERS, FRI SAT SUN 3/6-8**

"AMERICA LEADING "

Register for the District 1 Level FAMICOM. Held right at New Hope, same as last year. Folks from all over our 10 state region will harvest the benefit by attending. Receive all the super valuable training and insights from the powerful National Level Conference. And plan our amazing upcoming new year.

Are you "an activist member in any way"? Certainly, Hopefully every BCF and member is! Everyone - All Tribal Messiahs, Youth, and Young Adult leaders, Ministry leaders, ACLC leaders, Pastors, and Co-Pastors UPF, WFWPU, will get the crucial cutting edge experience.

We will discuss the profound insights of the last 7 years, goals and direction for this year and beyond. And TM's vision . The cost is \$30 per adult. Includes a number of meals! \$100 for a family of 4 plus. Please fill out the registration form below ASAP.

Register Here

hsa.regfox.com/sr2-famicon-2020

**Southeast SubRegion - March 6-8, 2020
Friday Evening , Sat Day, Sunday Morning
Friday 3PM -6PM Registration opens 4PM / Opening Dinner at 6PM
Registration Fee \$30 Per Person (\$100 for a family of 4 or more)
Location: New Hope Family Church
4801 M Tesla Dr.
Bowie, MD 20715**

For more information or any questions contact
Rev. James Stewart at: sr2victory@gmail.com

New Hope Family Church
4801 Tesla Drive, Bowie, MD 20715
ucmdpastor@gmail.com
410 562 8317



SR2 FAMICON 2020 - America Leading

FAMICON 2020

AMERICA

LEADING

Southeast SubRegion - March 6-8, 2020

Friday 3/6 Registration opens 4PM / Opening Dinner at 6PM

Registration Fee \$30 Per Person (\$100 for a family of 4 or more)

Location: New Hope Family Church
4801 M Tesla Dr.
Bowie, MD 20715

For more information or any questions contact
Rev. James Stewart at: sr2victory@gmail.com

Event *

SR2 Famicon 2020 (March 6-8, 2020)

Your Information

Name (For Use on Name Badge) *

Address *

City, State, and ZIP *

Email *

Phone Number *

Your Local Church Name *

Additional Participants

Additional members of your family Attending *

Additional Guests Attending *

Registration Fee

\$30.00

How will travel to the event *

Do you, your family members or guests have any special needs? Please note all. *

- None
- Homestay Requested
- Special Dietary needs

Please explain below

- Child Care

Enter number and ages below

Total

Billing Information

Name *

Payment Method

- Credit Card Pay at the Door

Card Number *



Expiration Date *

Address *

City, State, and ZIP *

Email *

Confirm Email *

Phone Number *

SUBMIT