

Registration  
Deadline  
June 14, 2005

REGISTRATION FORM  
2005 BEREAVED PARENTS OF USA GATHERING  
Las Vegas, NV July 15-17, 2005



Please list your names the way you would like them to appear on your Gathering Name Tag. \*If person registering is a sibling, please include age. **Please print legibly.**

1. \_\_\_\_\_  
First Name Last Name

Circle one: bereaved parent, grandparent, sibling (if sibling age \_\_\_\_\_), other \_\_\_\_\_

2. \_\_\_\_\_  
First Name Last Name

Circle one: bereaved parent, grandparent, sibling (if sibling age \_\_\_\_\_), other \_\_\_\_\_

3. \_\_\_\_\_  
First Name Last Name

Circle one: bereaved parent, grandparent, sibling (if sibling age \_\_\_\_\_), other \_\_\_\_\_

4. \_\_\_\_\_  
First Name Last Name

Circle one: bereaved parent, grandparent, sibling (if sibling age \_\_\_\_\_), other \_\_\_\_\_

\_\_\_\_\_  
Street or Post Office Address

\_\_\_\_\_  
Telephone number including area code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Email address

1. \_\_\_\_\_  
Your child's name

\_\_\_\_\_  
Child's age Date of Birth Date of Death Cause of Death

2. \_\_\_\_\_  
Your child's name

\_\_\_\_\_  
Child's age Date of Birth Date of Death Cause of Death

I am a BP/USA Chapter Leader and will be attending the Chapter Leadership Workshops and Luncheon on Thursday, July 14, 2005.

\_\_\_\_\_ Number of Leadership from your Chapter attending the Workshop.

\_\_\_\_\_  
Your signature

Please complete both pages

# REGISTRATION AND MEAL COSTS

2005 BP Gathering July 15-17, 2005

## Registration

Number of people attending \_\_\_\_\_ @ \$20.00 each = \$ \_\_\_\_\_  
*(for a total of no more than \$60.00 per immediate family)*

## Meals

Number of Total Meal Plans \_\_\_\_\_ @ \$150.00 each = \$ \_\_\_\_\_  
*(includes all 7 meals below; savings of \$7.00)*

Number of Friday Breakfasts only \_\_\_\_\_ @ \$19.00 each = \$ \_\_\_\_\_  
*Opening Ceremony*  
*Keynote Speaker: Mitch Carmody*

Number of Friday Lunches only \_\_\_\_\_ @ \$16.00 each = \$ \_\_\_\_\_  
*Speaker: Joyce Harvey*

Number of Friday Dinners only \_\_\_\_\_ @ \$27.00 each = \$ \_\_\_\_\_  
*Speaker: Harold Ivan Smith*

Number of Saturday Breakfasts only \_\_\_\_\_ @ \$19.00 each = \_\_\_\_\_

Number of Saturday Lunches only \_\_\_\_\_ @ \$22.00 each = \$ \_\_\_\_\_  
*Speaker: Prentice Minner*

Number of Saturday Dinners only \_\_\_\_\_ @ \$35.00 each = \$ \_\_\_\_\_  
*Speaker: Rosemary Smith*

Number of Sunday Breakfasts only \_\_\_\_\_ @ \$19.00 each = \$ \_\_\_\_\_  
*Closing Ceremony/Picture Presentation*

Total Cost of Registration & Meals \_\_\_\_\_ \$ \_\_\_\_\_

*Please make your check payable to BP/USA 2005 Gathering, and mail with Registration Form to:*  
David Hurley, Gathering Registration Chairman  
3805 W San Juan Street, Tampa, FL 33629  
(813) 832-3175

## REGISTRATION DEADLINE JUNE 14, 2005

Reservations for hotel must be made directly through hotel, see information in Brochure

Please advise us who you will be rooming with (in case of emergency): \_\_\_\_\_

Please advise us of the date of your arrival: \_\_\_\_\_

Date of your departure: \_\_\_\_\_

Arriving by:  Car  Airplane

Does the Gathering Committee have your permission to print your name, address, phone number, email and child's name, DOB and DOD in Gathering Directory?  Yes  No