

THE LUTHERAN SCHOOL OF THEOLOGY AT CHICAGO
2008 FALL SEMINARY SAMPLER
Sunday, October 26th - Tuesday, October 28th, 2008
REGISTRATION FORM

Please return by postal mail, email, or fax

GENERAL INFORMATION

Name:

Date:

Address/City/State/ZIP:

Work Phone #:

Home Phone #:

E-mail address:

Best way and times to contact you?

REGISTRATION INFORMATION

Date of arrival:

Date of departure:

How are you arriving? (Car, plane, train, bus) What airport/depot will you come into? Which flight/bus/train?

Do you need housing for the weekend?

Yes

No

Number of nights:

Allergies?

Number of people attending:

Names and relationship of visitors:

Would you like to attend church on Sunday?

Yes

No

Any special needs (i.e. dietary, physical, etc.)?

How did you hear about the Sampler Weekend? (Mark all that apply)

- Through my church/pastor
- Mailing from my synod
- Mailing from LSTC
- LSTC Website
- Friend at LSTC
- Friend who attended a previous Sampler Weekend/Campus Visit
- Synodical/Regional/National Event - Please specify

- Other - Please specify

We try to shape the Sampler Weekend to address the needs of the participants. Would any of these apply to you if you attend LSTC? (Mark all that apply)

- Commuter - commute every day or commute on weekends and live on campus during the week
- Children living on campus
- Interested in International Study or Internships
- Diaconal Ministry
- Ordained Ministry
- M.A. program
- Second career seminarian
- First career seminarian

What are your questions about LSTC (i.e. Candidacy, classwork, MDiv, MA, cultural/recreational, etc.)?