

26th conference of the Association of Lincoln Presenters

Name(s) _____			

	Number attending	Cost	Total
Registration Fee		\$40	
THURSDAY			
Evening social & presentation		\$0	
FRIDAY			
Artifacts at St. Mary		\$5	
Fort Leavenworth-lunch, presentations and tour		\$20	
Number of vegetarian requested			
Dinner & Keynote speaker		\$30	
SATURDAY			
Trip to Lecompton		\$40	
Number of vegetarian requested			
Mary's Tea and men's gathering		\$0	
Evening meal and Business Meeting		\$25	
Number of vegetarian requested			
SUNDAY			
Staying for church (Yes/No)			
Total			\$
IF PAYING BY CHECK			
MAKE CHECK OUT TO:	ALP		
MAIL TO:	3979 S BAILEY ROAD		
	WABASH, IN 46992		