

Virginia Annual Conference 2019  
The Berglund Center, Roanoke, VA  
June 20-22, 2019

**Banquet Request & Registration Form**

Name of Organization/Group: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address/Phone/Email of Contact Person: \_\_\_\_\_

\_\_\_\_\_

Approximate number of people attending: \_\_\_\_\_

Preferred Type of Meal: \_\_\_\_\_ Breakfast \_\_\_\_\_ Lunch \_\_\_\_\_ Dinner

Preferred Start Time: \_\_\_\_\_

Preferred Day/Date: \_\_\_\_\_

Preferred Price Range Per Plate: \$ \_\_\_\_\_ but no more than \$ \_\_\_\_\_

Desired Location for Banquet: \_\_\_ Church \_\_\_ Restaurant \_\_\_ Hampton Roads Convention Center

Other Pertinent Information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE COMPLETE AND RETURN TO:

Rev. Michael Reaves  
8341 Fletchers Chapel Road  
King George, VA 22485-6701  
[michaelreaves@vaumc.org](mailto:michaelreaves@vaumc.org)