



Mother/Daughter Empowerment Day

TRANSFORMING THE MOTHER / DAUGHTER RELATIONSHIP

August 21, 2010

9:30am – 2:00pm

A.C. Jackson Wellness Center

REGISTRATION

_____		_____	
Daughter's Name <i>(Please Print)</i>		Age	
_____		_____	_____
Address		City	State Zip
_____		_____	
Parent / Guardian Name <i>(Please Print)</i>		() Home Phone	
_____		_____	
Parent / Guardian Signature		() Alternate Phone	
_____		_____	
Parent / Guardian Signature		Email Address	
_____		_____	
		Date Submitted	

Please indicate T-shirt size(s)
and quantity

- _____ X-Small
- _____ Small
- _____ Medium
- _____ Large
- _____ X-Large
- _____ XX-Large

One (1) T-shirt per person attending

**Please complete this form, and return it to
the OYD, or fax it to
803.776.8839 no later than August 10, 2010.**



To know God, to love and to serve