

“But blessed is the one who trusts in the Lord, whose confidence is in him. They will be like a tree planted by the water that sends out its roots by the stream. It does not fear when heat comes; its leaves are always green. It has no worries in a year of drought and never fails to bear fruit.”

Jeremiah 17:7-8



APA Heartland Regional Conference

October 11-14, 2018

Executive Board Meeting - October 11

Classes Friday and Saturday—October 12 and 13

Business Meeting and Banquet - October 13



Location

First Presbyterian Church
321 West South Street
Kalamazoo, MI 49007

Lodging

Hampton Inn Kalamazoo Airport
2610 Airview Boulevard, Portage, MI 49002
269.343.0400
(\$114.45 / night; tax and fees included;
\$57.23 / night if you share a room)

Mention APA Heartland Regional Conference when making your reservation.

Reservation deadline is Thursday, September 13, 2018
4:00pm local time.

Classes

Church History Before Reunion, A and B
Polity 1, A and B
Book of Confessions
Presbytery Foundation
Office Administration
Theology, A and B
Personal Investing
Spiritual Growth

Banquet

(Martell's Restaurant)

Starter - House Salad

Entree (your choice of)

- * Three Cheese Ravioli with your choice of marinara or parmesan cream sauce
- * Rigatoni Con Pollo E Peperone Rossi (pasta and chicken)
- * Prime Rib Of Beef
- * Pan-Seared Salmon

Dessert - Chocolate Mousse

The **Silent Auction** theme is “Deep roots to branch out”. Suggested items are those that are wood related, tree like, branches, leaves, etc. Ticket sales benefit the Donna Williams Scholarship Fund. Raffle tickets are available throughout the conference - \$1.00 each or 6 for \$5.00.

Mission Offering supports *Ministry with Community*, benefitting the homeless and hungry people in downtown Kalamazoo. You can learn more about this mission at ministrywithcommunity.com. (Heartland will donate \$50.00 in addition to your generous donations.)

Conference Registration

Heartland Regional Conference

October 11-14, 2018

My Name _____

I am working on Level _____ certification

_____ I have a permanent name tag _____ I need a name tag

My nametag should read _____

Church/Governing Body/Agency _____

My home address _____

City _____, State _____, Zip _____

Work phone _____, Home phone _____

or Cell phone _____

Preferred email _____

(home / work, please circle one)

Do you have dietary or health needs / restrictions? _____no

_____yes, please explain _____

Your Registration Fee

_____ \$95.00 - includes lunch, and 2 snack each day, and banquet*

Guests Meal Package

_____ \$45.00 includes lunch, and 2 snack each day, and banquet*

_____ \$25.00 banquet* only

Guest name _____

_____ Scholarship donation

_____ Total Enclosed

**does not include alcoholic beverages; the Martell wait staff will be instructed to bill the individual for alcohol*

Make checks payable to Administrative Personnel Association

Mail to Leslie Keusch 8093 Gull Manor, Richland, MI 49083

*Registration fee and all forms must be received by **Friday, August 24, 2018.***

You will receive a confirmation email when fees and all three (3) forms have been received.

Class Registration

Place an X in front of the classes for which you are registering.
You may select only one class at each time period.

Friday, October 12 (morning classes)

_____ Level I.....Church History (Before the Reunion) - Part A*

_____ Level I..... Polity I - Part A*

_____ Level III.....Book of Confessions

*you must select Part B, Friday afternoon, in order to receive full credit for Level I certification

Friday afternoon

_____ Level IChurch History (Before the Reunion) - Part B

_____ Level I.....Polity I - Part B

_____ ElectivePresbytery Foundation

Saturday, September 30 (morning classes)

_____ Level I.....Theology - Part A *

_____ Level I, II, or III Office Administration

_____ ElectivePersonal Investing

*you must select Part B, Saturday afternoon, in order to receive full credit for Level I certification

Saturday afternoon

_____ Level I.....Theology - Part B

_____ Level I, II, or III Spiritual Growth

_____ Level III.....General Assembly Entities

*This form **must** be mailed with your registration form.*



Emergency Information Form



*will be held in confidence by Heartland Treasurer, Leslie Keusch, throughout the Conference.
If anyone experiences an emergency requiring medical assistance, please find Leslie so this form can be shared with the emergency healthcare providers.*

Return form to me in a sealed envelope at the close of the banquet

Shred form after the banquet

Name _____

In case of emergency, please contact _____

Phone _____ Relationship _____

Blood type _____

Allergies (foods and medications) _____

I take the following medication(s) daily (include over the counter medications)

Name of medication	Dosage	Times per day	When (AM/PM, etc.)

*This form **must** be mailed with your registration form.*