



Northwest Synod of Wisconsin
Evangelical Lutheran Church in America
God's work. Our hands.

REQUEST FOR DISPLAY SPACE

Organization Name: _____

Contact Person: _____

Address: _____

Daytime Phone: _____

E-mail Address: _____

I will need the following:

_____ 6' tables @ \$15 each = \$ _____

_____ Chairs

_____ I wish to eat lunch @ \$10 _____

Total Amount Enclosed: \$ _____

Please make checks payable to The Northwest Synod of Wisconsin, 944 24 1/4 Street, Suite 2, Chetek, WI 54728