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Econo-Conference by MyMeetings.org

You are permitted up to 30 participants at any regular congregation meeting!

3/17/2015 **The KH and listeners can join any regular meetings by dialing a local phone number and entering a PIN number**

DO NOT FILL IN FORM BY HAND: Click on blanks fill in on screen before printing

NO ANNUAL BILL WILL BE SENT, YOU WILL RECEIVE AN ANNUAL PAYMENT SCHEDULE

Service is on a per congregation basis ONLY

No sharing of this service with NON paying Congregations!

( ) Click on each item to indicate you understand, if in question ask what that means before ordering:

( ) We have 1 congregation in our auditorium. Cost $180.00 per congregation annually. (One PIN number incuded)
( ) We have _?_ congregations meeting in the same auditorium at different times. (All share same dial-in number)
( ) All congregations share the same PIN number unless you order additional PINs.

( ) We want private PIN numbers for ___ additional congregations at $50.00 each annually per congregation!

( ) Enclosed is our check in the amount of $??0.00 US, check # _____ for the first year of service.

( ) Sound attendand dials a * code to get count and listeners dial (1) on their phone to mute.

( ) The KH phone number that will be used to connect to the conference _____

IMPORTANT: Insure correct KH phone number. From KH sound station dial a cell phone and observe the caller ID,

Your Congregation Name _____ Cong. Number _____

Address (physical) _____

City _____ State _____ Zip _____

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Contact Person _____ Phone _____.

E-Mail Address _____

.

COBE _____Phone _____

E-Mail Address _____

Accepted by _____ _____ _____

Print Name of COBE Signature Date

Secretary _____ Phone_____ E-Mail_____

Make check payable to MyMeetings.org

3398 Sanford Drive
Marietta GA 30066
E-mail Info@MyMeetings.org

888-406-7507

Select a local phone number or the one closest to you that can be dialed as a LOCAL call. Do NOT select a number that can not be dialed as a local call! Information below must be entered exactly as shown on econo numbers page.
State ____ Area Code ____ Prefix ____ City _____

WE UNDERSTAND AND AGREE THAT WE USE OUR PAYMENT SCHEDULE TO ACT IN PLACE OF AN ANNUAL BILL. OUR CONGREGATION OR OPERATIONS ACCOUNTANT IS RESPONSIBLE TO MAKE OUR PAYMENTS ON TIME EACH YEAR OR PAY AN AUTOMATIC LATE FEE. A copy of our Payment Schedule with the returned check