



Fall

# JUBILEE



## Rooming List

**Registration Number:**

**Church:**

**Contact:**

**Rooming List:**

 OF 

**Room Type:**

- Premium Room
- Standard Room

*Print additional copies as needed. Keep a copy for your files. Your registration number is required for accurate room assignments.*

**Mail or Fax with deposit & release form to:**

**Return by Mail:**

Jubilee Conferences  
P.O. Box 2034  
Woodstock, GA 30188

**Return by Fax:**

770-592-8239

<b>ROOM #</b>	<hr/>	
	GUEST #1	GUEST #2
	GUEST #3	GUEST #4
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