



**FORM IX**  
**OFFICIAL REGISTRATION – CONVENTION SUPPORT**  
**2023 LCMS CONVENTION**

Auto-fill form at:  
[lcms.org/convention/registrations](https://lcms.org/convention/registrations)

**Classification (CL)\***

- O – Ordained Minister
- C – Commissioned Minister
- L – Layperson

**Registration Category: One category/entity per form – SELECT the correct category**

- Worship/Music Leaders
- Task Forces
- Committee for Convention Nominations
- Convention Presenter, Essayists, Musicians
- Parliamentarian
- Local Committee (volunteers)
- Assistant Secretary
- Legal Counsel
- Other: \_\_\_\_\_
- Committee on Elections
- Time Keeper, Stage Assistants, etc.

\*(Note: Enter a CL code to indicate classification.)

Last Name - First Name - MI - Suffix	*CL	Address		
		Street:		City/State/ZIP:
		P.O. Box:		City/State/ZIP:
		Email:		**Cell Phone:
		Street:		City/State/ZIP:
		P.O. Box:		City/State/ZIP:
		Email:		**Cell Phone:
		Street:		City/State/ZIP:
		P.O. Box:		City/State/ZIP:
		Email:		**Cell Phone:
		Street:		City/State/ZIP:
		P.O. Box:		City/State/ZIP:
		Email:		**Cell Phone:
		Street:		City/State/ZIP:
		P.O. Box:		City/State/ZIP:
		Email:		**Cell Phone:
		Street:		City/State/ZIP:
		P.O. Box:		City/State/ZIP:
		Email:		**Cell Phone:
		Street:		City/State/ZIP:
		P.O. Box:		City/State/ZIP:
		Email:		**Cell Phone:

\*\*Cell phone for convention use only.

Submitting by (Name/Phone): \_\_\_\_\_ / \_\_\_\_\_

<p><b>By typing my initials and emailing this report form I affirm,</b> to the best of my knowledge, the report form received is complete and accurate.</p>	<p><b>G#U o#</b></p>	<p><b>Initials:</b></p>	<p><b>Date:</b></p>
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