

**First Unitarian Society of Milwaukee**  
**ADULT RE and SPIRITUAL DEVELOPMENT REGISTRATION FORM**

Name: \_\_\_\_\_ church member? Yes / No

Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

Please register me for the following classes or programs:

Title	Cost
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL: \$ \_\_\_\_\_

Please enclose a check for the total amount (made payable to "First Unitarian Society" with "Adult RE" noted in the memo) and return to the Adult RE Table on Sunday mornings, or mail to:

**First Unitarian Society**  
**Attn: Adult Religious Education**  
**1342 N. Astor,**  
**Milwaukee, WI 53202**