



**REGISTRATION FORM  
FOR THE  
INTERNATIONAL CONFERENCE ON SATANIC RITUAL ABUSE**

REQUIRED  
NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_

NOT REQUIRED/ BUT HELPFUL TO US  
CHURCH \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

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Note: if you are a victim this event will be highly triggering

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COST: \$89 DOLLARS [ ] OR MARRIED COUPLES \$140 [ ]  
ENCLOSE CHECK

Send in this registration form with payment to:

Sherry Clausen SRA CONFERENCE  
PO BOX 755  
UNIONTOWN, OHIO, 44685

**MAKE CHECKS PAYABLE TO 'SHERRY CLAUSEN'**  
ON LOWER LEFT HAND....NOTE ON YOUR CHECK 'SRA CONFERENCE'

(Sherry is the administrator and in charge of all registrations)