Date and Time: **Saturday, May 1, 2027, 12:00 pm – 3:00 pm**

Address: **First Baptist Church of Hudson**
**345 Main St., Hudson, NC 28638**

**Early Bird (Before Feb 1st):** $30 per person;
$150 per table (seating 6)

**Beginning Feb. 1st:** $40 per person;
$200 per table (seating 6)

**Childcare Option: $10 per child** - Childcare will be offered for children age 9 and under. A children's meal will be available to children during the event in the childcare area.

***Registration and payment must be received by April 28, 2027.***

**1 - Individual Registration**

Name: _____

Address: _____

Email: _____

Phone Number:(_____) _____

*(Each Individual participant will need to fill out separate form)*

**2 - Table (6 Seats) Registration**

***(Must fill out Table seat tickets on next page)***

Name: _____

Address: _____

Email: _____

Phone Number: _ (_____) _____

| Quantity | Amount | Registration Type |
|---|---|---|
| _____ | $_____ | Individual |
| _____ | $_____ | Table |
| _____ | $_____ | Childcare |
| | **$**_____ | **Payment Total** |

***Early Bird Payment must be received before February 1, 2027 to get discounted pricing.**

Checks payable to: Bethel Colony of Mercy
(Memo line please write: Royal Tea Registration)

Mail to: Bethel Colony of Mercy
Attn: Ms. Donna Bowman
1181 Camp Carolwood Rd.
Lenoir, NC 28645

Questions: please contact Ms. Donna Bowman
at donnabowman@bethelcolony.org
or Ph: 828-754-3781 ext. 130

**3 – Childcare Registration** *($10 per Child)*

| Adult/Guardian Attending | Child's Name | Age | Meal: (Yes or No) |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

## Table (6 Seats) Registration

(Please put TBD for seat tickets of unknown participants and contact Ms. Donna Bowman by Wednesday, April 28th, 2027 with ticket seat information.)

**Ticket 1:**

Name: _____

Address:_____
_____

Email: _____

Phone Number:(_____) _____

**Ticket 2:**

Name: _____

Address:_____
_____

Email: _____

Phone Number:(_____) _____

**Ticket 3:**

Name: _____

Address:_____
_____

Email: _____

Phone Number:(_____) _____

**Ticket 4:**

Name: _____

Address:_____
_____

Email: _____

Phone Number:(_____) _____

**Ticket 5:**

Name: _____

Address:_____
_____

Email: _____

Phone Number:(_____) _____

**Ticket 6:**

Name: _____

Address:_____
_____

Email: _____

Phone Number:(_____) _____