



Single Mother's Retreat Registration 2021

ATTENDEE INFORMATION

Name: _____
Address: _____
City, State, Zip: _____
Email (REQUIRED): _____
Phone #: _____
T-shirt size : _____ (not guaranteed after Jan. 15)
Age: _____
Any Food Allergies?

Roommate Request: _____
Name/Age/ Gender of Children: _____

How did you hear about this retreat? _____

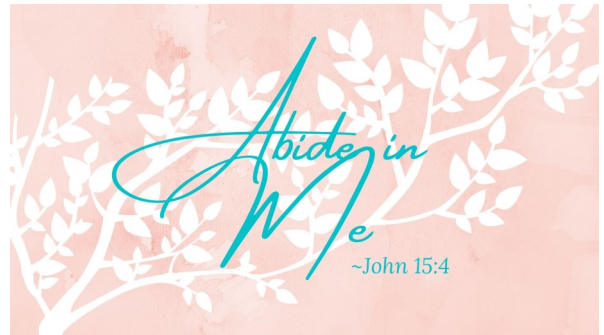
Registration Fee Options (circle one):

\$15—Dorm Room

\$30—Shared Private Room (2-4 people)
(Must have known roommate)

\$50—Single Private Room

Jan 29th Registration Deadline!



Abide in Me, and I in you. As the branch cannot bear fruit by itself, unless it abides in the vine, neither can you, unless you abide in Me.

~John 15:4

PAYMENT

Registration fee: \$ _____
Method of Payment:
 Visa
 Master Card
 American Express
 Check/Cash (Mail in)
Credit Card # _____
Exp. Date: _____
CCV# (back of card): _____
Amount Authorized to Charge: \$ _____
Signature: _____