

2009 Camano Chapel Women's Retreat Registration Form

May 1<sup>st</sup>-3<sup>rd</sup> – Cedar Springs Christian Retreat Center

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ E-mail address \_\_\_\_\_

Home Church \_\_\_\_\_

*I am presently certified in First aid/CPR and willing to administer aid at the retreat if needed.*

**Saturday only attendee** (includes 3 meals)

**Room mate preference** (list up to 3 roomates)

Choice #1: \_\_\_\_\_

Choice #2: \_\_\_\_\_

Choice #3: \_\_\_\_\_

**Please check one Lodging preference: CEDAR SPRINGS DOES NOT GUARANTEE NEW LODGE AVAILABILITY.**

New Forest Lodge (A climb up several flights of stairs through the trees.)

Chalet (Lower level where meals and meetings take place.)

Older lodge lower level. (Close to activities with easy walking path).

*I need transportation assistance* (A \$7.00 van fee will be collected upon departure)

**For registration staff only: *FINAL PAYMENT DUE – April 19, 2009***

Received by: (Name) \_\_\_\_\_ Date: \_\_\_\_\_

Full weekend price - \$135 (Forest Lodge) \$125 (Chalet) – Saturday only, (include 3 meals) - \$50.00

<input type="checkbox"/> Money Received Deposit	<input type="checkbox"/> Money Received Full payment
Cash (amount) _____	Cash (amount) _____
Check (amount) _____	Check (amount) _____

Room number assigned \_\_\_\_\_

**For registration information contact Susan Shaw @ 387-0150. For scholarship information, contact Kathy Harrison @ 387-7202**