

WOMEN'S MINISTRY ANNUAL RETREAT REGISTRATION FORM

October 16-17, 2009 / Bon Secours Spiritual Center - Marriottsville, MD 21104

Please Print Legibly

DATE:

First Name:	Last name:	Street Address: (include city, state, zip)
Home phone:	Work phone:	Cell phone:
Email address:	Emergency Contact:	Emergency Contact Phone:

REGISTRATION FEES¹

(includes overnight stay, entrance to workshops, Friday dinner, Saturday breakfast and lunch)

Registration Deadline Sunday, August 30, 2009 / Final Payment Wednesday, September 27, 2009

Please fill out appropriate boxes below:

ACTIVITY	FEE	AMOUNT PAID	BALANCE DUE
Deposit (August 30 th) Required	Non-refundable after August 30th \$50		
Registration, Single Room One night/Three meals	\$170		
Day Event/Commuter	Friday (One meal) \$50		
Day Event/Commuter	Saturday (Two meals) \$50		
Bus Transportation (Opt)	\$10		
Total Payment Enclosed			
Special dietary needs:	Special Accommodations/Physical Challenges Requests:		

RETURN COMPLETED REGISTRATION FORM, FULL PAYMENT OR DEPOSIT TO:

Miya Gray or Vergie Thomas. Checks should be made out to Ward Memorial AME Church with check memo to Women's Retreat. Online registrants mail form and payment to Ward Memorial A.M.E. Church / 241 42nd ST, NE., Washington, DC 20019 / Attn: Vergie Thomas.

Questions: Miriam Dixon - banana5768@gmail.com or Theresa Jenkins - t_b_jenkins@yahoo.com

Administrative Use Only

Name:	Amount Paid: Cash: Check Amount: \$_____ Check No:
Confirmed by:	Date:

¹ Please review general information, cancellation, transfer and personal check policy and corresponding date information.