



Maranatha Chapel's Women's Retreat
 April 23-25, 2010 at Murrieta Hot Springs

Registration [Please write legibly, thank you]

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: [] - home [] - work

[] - cell [] - other

Email: _____ @ _____

Please contact me by phone, I do not use email.

Emergency Contact[s] [] Name: _____

Retreat cost includes conference materials, lodging and meals
\$185 per person - There are 6 per room - Please make checks payable to Maranatha Chapel

Scholarships are available and are reviewed on a case by case basis - Please see separate scholarship form

PAYMENT:	CASH \$	CHECK# \$	FOR OFFICE USE ONLY
VISA / MC#	\$ _____ Name as it appears on card: _____		
<small>No debit cards, please</small>			
Credit Card#	_____/_____/_____/_____	Exp. Date: ____/____/____	FOR OFFICE USE ONLY APPROVAL CODE
Signature: _____			
<small>I authorize Maranatha Chapel to charge my card for the amount above</small>			
CVV2 Code: Number on the back of the card [in the signature area] up to 8 digits: _____			
Registration is a commitment to attend and refunds cannot be given.			Initial: _____

Please list your first 3 roommate choices & we'll do our best to accommodate your request

1. _____ 2. _____ 3. _____

Are you a morning person? YES NO Are you a night owl? YES NO

Would you like to be a cabin hostess? It's easy! YES NO, THANK YOU

Would you like to help with the retreat? YES NO, THANK YOU

Would you like to be part of a carpool? YES NO, THANK YOU

Do you have any special needs we can help you with? [i.e. food allergies, physical issues, etc] _____

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Payment Processed

Date CC Charged: _____

Amount Charged: _____

Cash Ck# \$
[include method & date paid]

Staple Credit Card Receipt HERE

Layaway Payment Plan _____

Date	Received By	Amount Paid		Amount Due		Notes

Transportation Needs: _____

Notes: _____
