



LITTLE FALLS 2016 ALL CHURCH RETREAT

<i>Office Use Only</i>	
Csh	_____
Chk	_____
PayPal	_____
Date	_____

10:00 a.m. Saturday, October 8 – 2:00 p.m. Sunday, October 9
Skycroft Retreat Center, 9621 Frostown Road, Middletown, MD 21769

REGISTRATION INFORMATION

Name: _____

Spouse's name (if applicable): _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Please enter names of children attending:

Child's Name (First & Last)	Age	Grade	Allergies/ Special Needs

HOUSING OPTIONS and PRICES:

Overnight prices include the cost of 4 meals. Saturday-only prices include facility costs and 2 meals.

Lodge Room (Bunk Beds)

(Lodge occupants, please bring your own sheets and towels.)

Number of adults _____ X \$65 Subtotal: _____

Number of kids (ages 5-10) _____ X \$45 Subtotal: _____

Number of children (age 4 and under) - FREE Subtotal: FREE

Lodge TOTAL: _____

Motel Room (2 Double Beds)

Number of adults _____ X \$85 Subtotal: _____

Number of children (ages 5-10) _____ X \$55 Subtotal: _____

Number of children (age 4 and under) - FREE Subtotal: FREE

Motel TOTAL: _____

Please don't let financial cost deter your participation. For scholarships, contact Matt Merrill (matt@littlefallschurch.org) or Jennifer Greenleaf (jennifer@littlefallschurch.org).

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If lodging with a friend, roommate requested: _____

Saturday Only

Number of adults _____ X \$40

Subtotal: _____

Number of kids (ages 5-10) _____ X \$25

Subtotal: _____

Number of children (age 4 and under) - FREE

Subtotal: FREE

Saturday Only TOTAL: _____

TRANSPORTATION

Would you like to carpool? Y N

If you wish to carpool, can you drive? Y N

PRAYER

How can we be praying for you and your family as we prepare for the All Church Retreat?

Please join the staff and Retreat Committee in praying for the Retreat. In particular, please ask the Lord to help us draw near to Him and each other while we are at Skycroft. Thank you!