

## Family Retreat 2017

## REGISTRATION FORM

Family Name:Email:			
Address:			
City, State, Zip:			
Church Affiliation:			
Work #:	Home #:	Cell #:	
	embers of the family who will be a	_	D.L.
Name	Date of Bir	tn	Relationship
Please indicate your pl	ans for the Homecoming Retreat	by checking the approp	oriate box:
• Friday 6:00 PM to Sur	nday 2:00 PM (includes 6 meals) \$120/adult; \$90 youth; \$360 max fam : \$65/adult; \$58/youth; \$195 max fan	ily rate	
Friday 6:00 PM to Saturday 5:00 PM (includes dinner, breakfast, and lunch)  AC Lodging: \$65/adult; \$50/youth; \$195 max family rate			
Saturday 9:00 AM to Sunday 10:00 AM (includes lunch, dinner, and breakfast)  AC Lodging: \$65/adult; \$50/youth; \$195 max family rate			
• Saturday 9:00 AM - 5 \$12 per perso	:00 PM (includes lunch and all activition	25)	

To register, please return the completed registration form and payment of \$12 per person attending. For those choosing to stay overnight, this \$12/person fee will serve as your non-refundable, non-transferable deposit. You may also register online at www.cedarkirk.org. Upon receipt of your registration and deposit, you will receive confirmation materials and a What-To-Bring list.

Please return this completed registration form and deposit to:

Cedarkirk/PCCM 1920 Streetman Drive Lithia, FL 33547-1822