

DIOCESAN RETREAT COMMITTEE

RESERVATION FORM FOR THE ADVENT SILENT RETREAT DECEMBER 5-7, 2008

NAME: _____
MAILING ADDRESS: _____

TELEPHONE: _____ FAX _____

E-MAIL: _____

NAME AS YOU WISH IT TO APPEAR ON YOUR NAME BADGE:

PARISH/CHURCH AFFILIATION: _____

EMERGENCY CONTACT PERSON _____

PHONE, DAY: _____ NIGHT _____

PLEASE INDICATE ANY SPECIAL DIETARY REQUIREMENTS:

THE CATHEDRAL COLLEGE IS NOT WHEELCHAIR ACCESSIBLE.

A DEPOSIT OF \$100.00 IS DUE BY NOVEMBER 7, 2008

THE BALANCE OF \$95.00 IS DUE ON OR BY NOVEMBER 21, 2008

A LIMITED NUMBER OF SCHOLARSHIPS IS AVAILABLE UPON REQUEST.

**PLEASE RETURN THIS FORM WITH YOUR CHECK FOR THE DEPOSIT
(OR THE FULL AMOUNT) OR YOUR SCHOLARSHIP APPLICATION FORM TO:**

**JOAN SHELTON
2126 CONNECTICUT AVE., NW
WASHINGTON, DC 20008**

PHONE: (202) 232-1667

E-MAIL: JOANSHELTON@VERIZON.NET

Retreat Fee: \$ _____ : Deposit (\$100 required)

\$ _____ : In Full (\$195)

Tax-deductible contributions: \$ _____ : (for DRC Scholarship Fund)

\$ _____ : (for the DRC General Fund)

Total Enclosed: \$ _____

Checks should be made out to EDOW, with DRC on the Memo line.