Senior High Retreat
Group Registration Form
January 22-24, 2010

Name of Church_____
Address _____
City _____ State _____ Zip _____

Contact Person _____ _____
Phone #'s: Office or home or cell

Email Address _____

Lodging (please circle choice) Scott Lodge Main Lodge Cabins

Make sure you have at least one adult advisor per eight youth of the same gender.

Conferees

Name	***Gender***	***Youth (grade) or Adult***
_____	_____	_____
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