

Wayumi

Open Weekend Registration Form

DATE OF RETREAT: _____
(Please call or check www.wayumi.com for Open Weekend dates.)

NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

OTHER FAMILY MEMBERS COMING: (please list names and give the age of any children.)

CHURCH AFFILIATION: _____
(name, town, state)

| | ADULT (TEENS & UP) | CHILD (AGE 6-12) |
|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------|
| Registration fee, per person, due at time of registration: <i>(Refundable for cancellations received 30 days prior to weekend.)</i> | \$20 | \$20 |
| + | + | + |
| Participant Fee, per person, due upon arrival: | \$49 | \$15 |
| Total cost of retreat, per person:* | \$69 | \$35 |

*If finances will be a strain for your family, please contact us to see what options may be available.

Please make checks payable to New Tribes Mission.



Mail registration form and check to:

New Tribes Mission
241 Old Forge Hill Rd
Jersey Shore, PA 17740

Phone: 570.398.0639

E-mail: wayumi@ntm.org