

REGISTRATION FORM

- Please type or print clearly.
- Only one participant per registration form.
- Payment must accompany this form.

4 WAYS TO REGISTER

- | | |
|--|---|
| 1. ON-LINE:
www.franciscanconferences.com | 3. BY FAX:
740-284-5494 |
| 2. BY MAIL:
Franciscan University
Christian Outreach Office
1235 University Blvd.
Steubenville, OH 43952 | 4. BY PHONE:
740-283-6314 or
800-437-8368 |



Life-Nurturing Love Retreat: Biblical Wisdom for Parenting Teens and Young Adults in New Phases of Life March 12 – 14, 2010

(Miss/Mrs./Ms./Sr./etc.)	First Name	Last Name		
Street Address	City	State	Zip	Country
Home Phone	Work Phone	E-Mail Address		

**In order to organize the small groups for the best sharing,
please answer the following by circling YES or NO to the
questions below:**

- | | | |
|-------------------------------|-----|----|
| 1. Are you married?: | YES | NO |
| 2. Do you have children? | YES | NO |
| 3. Do you have grandchildren? | YES | NO |

**Registration Fee: \$65.00
Optional Meal Plan: \$50.00**

6 Meals: Friday Dinner through Sunday Lunch

PAYMENT MUST ACCOMPANY THIS REGISTRATION FORM.

Please note our cancellation policy below.

All Payments must be in U.S. Funds.
Sorry, we cannot accept debit cards.

METHOD OF PAYMENT—MUST BE IN U.S. FUNDS

Enclosed Check or Money Order # _____

Credit Card: Master Card Visa Discover

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Expiration Date: Month ____ Year ____

Please Print Name as it appears on Credit Card:

Signature I authorize Franciscan University to charge my credit card
for the total amount due.

Cancellations:

All Cancellations must be made in writing and are subject to a \$25.00 cancellation fee per person. Registration Cancellations made after March 19, 2010 will receive NO Refund. Meal Plan Cancellations made after March 5, 2010 will receive NO Refunds.

All Refunds will be in U.S. Funds.

Office Use Only: Date: _____ Init: _____ Confirmation #: _____