

Registration Information

Name: _____

Spouse: _____

Address: _____

Phone: _____

Email: _____

Children at home? _____ yes _____ no

Adult Children? _____ yes _____ no

I/we will attend

_____ Saturday morning session (Visionary Parenting/Grandparenting)

_____ Saturday evening session (Visionary Marriage)

_____ Sunday afternoon session (Visionary Relationships with Teens/Adult Children)

The same registration fees covers ALL THREE SESSIONS - you can benefit from them all!

Will you need childcare (for well children through 5th grade)?

_____ Saturday morning session (Visionary Parenting/Grandparenting)

_____ Saturday evening session (Visionary Marriage)

_____ Sunday afternoon session (Visionary Relationships with Teens/Adult Children)

List children's names/ages and any food allergies or special needs they might have:

Adults attending (indicate number):

_____ Gluten Free

_____ Dairy Free

January Pre-Registration: \$10/individual or \$20/couple - Enter drawing for free resource

February 1-24: \$15/individual or \$25/couple

February 25-March 3: IN OFFICE \$20/ind. or \$30/cpl - NO childcare or Sunday lunch