

# REGISTRATION

1991-2010



**First Baptist Church of Phillipsburg**  
Annual Women's Retreat

**November 5-7, 2010**

**Traber Center at Camp Sankanac**  
**Spring City, PA**

*Calling all past participants and newcomers!  
Please join us for what promises to be a weekend of  
deep spiritual growth/renewal,  
heartwarming fellowship and reunion of friends*

Please read and answer all questions.  
PLEASE REMEMBER THIS IS A **NO-SMOKING** FACILITY!

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

PHONE \_\_\_\_\_ (H) (C)

Email \_\_\_\_\_

**COST: \$140.00 per person (3-4 in a room)**  
**\$160.00 per person (1-2 in a room)**

**PAYMENT:** Please check one of the following:

- Payment enclosed
- \$75.00 deposit enclosed
- Not attending, but would like an Anniversary CD for \$10

Please make checks payable to **First Baptist Church of Phillipsburg**

Return this form and check by **October 18th** directly to Terry Ferguson, 648 Hillcrest Blvd. Phillipsburg, NJ 08865

**ROOMING** – There are up to four in a room with one set of bunk beds and two twin beds.

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| Are you able to sleep in the top bunk?    | Yes <input type="checkbox"/> | NO <input type="checkbox"/> |
| Are you able to sleep in the bottom bunk? | Yes <input type="checkbox"/> | NO <input type="checkbox"/> |
| Will you need a disability friendly room? | Yes <input type="checkbox"/> | NO <input type="checkbox"/> |
| Kitchen requested?                        | Yes <input type="checkbox"/> | NO <input type="checkbox"/> |
| Quiet Zone preferred?                     | Yes <input type="checkbox"/> | NO <input type="checkbox"/> |

**I would prefer to room with: 1 ( ) 2 ( ) 3 ( ) people**

Preferred Roommates \_\_\_\_\_



**TRANSPORTATION** – In order to be at Traber Center by 7:30 PM, we recommend you leave the Phillipsburg/Easton area no later than 6:00 PM (earlier if planning a dinner stop). **PLEASE DO NOT ARRIVE BEFORE 6:00 PM AS THIS IS OUR OFFICIAL CHECK-IN TIME.**

**Please answer the following questions:**

**I am willing to drive my car** and have room for \_\_\_\_\_ passengers. I am leaving from \_\_\_\_\_ at \_\_\_\_\_ PM.

**I would like to be a passenger in a carpool**  
The most convenient time for me to leave is \_\_\_\_\_ PM.

**PLEASE CHECK ALL OF THE FOLLOWING THAT APPLY:**

I would like to make a financial donation to help someone that may otherwise not be able to attend the retreat.

I will pray for the committee members and the speaker

I will prepare something for the evening snacks or contribute money towards purchasing snacks.

I will help with the set-up and clean-up of refreshments

I am interested in providing some form of special music during the weekend \_\_\_Vocal \_\_\_Instrumental (\_\_\_\_\_)

I am interested in sharing my testimony

I have the following food allergies or special dietary needs:

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I request prayer for:

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