

REGISTRATION

WMF Women's Retreat

Print, Complete, Mail to:
Camp Camrec 18899 Little Chumstick Creek Rd. Leavenworth Wa, 98826

Name _____ Church _____

Address _____

Phone _____

E-mail _____

I need a scholarship in the amount of \$ _____

I am willing to contribute toward scholarships in the amount of \$ _____

I have special request(s): (lodging, dietary,
etc) _____

