



Oldenburg Franciscan Center
center@oldenburgosf.com
www.oldenburgfranciscancenter.org
812 933 6437

Registration Form: **Women's Retreat**

Name _____

Address _____

Phone Number _____

Email Address _____

Special diet or needs _____

*Check payable to
Oldenburg Franciscan Center
(50% payment due January 10th; non-refundable by that date)*

*Price:
\$110 for single room
\$90 for shared room*

*Cash payments (paid at retreat to Mrs. Wilson, organizer):
\$13 (\$10 for the food fee and \$3 for the office supplies)*

*Mail to: Mrs. Cindy Wilson
13917 Bear Tree Lane
Sunman, IN 47041*

*NOTE: Please make out check only for the retreat center fee made out as indicated above, please do not send the food fee nor the office supplies fee in the check.
* Bring cash to the retreat for the food fee and the office supplies fee to be paid directly to the retreat organizer Mrs. Wilson.*