

Hillview Bible Chapel Retreat 2010

Koinonia Conference Grounds

September 10-12, 2010

Topic: **Devoted to Fellowship**

Last Name: _____

Date: _____

First Name(s) 18 yrs and up: _____

Kids Names: _____ Age: _____ Nursery (0-4): _____ Kids Program (5-12): _____

_____ Age: _____ Nursery (0-4): _____ Kids Program (5-12): _____

_____ Age: _____ Nursery (0-4): _____ Kids Program (5-12): _____

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_____ Age: _____ Nursery (0-4): _____ Kids Program (5-12): _____

Willing to help in the nursery or kids program? _____ Session Pref/Qty _____

Cost:

of Adults (18 and up) _____ x \$ 100.00 = _____

of Kids (3-17) _____ x \$ 50.00 = _____

of kids (0-2) _____ x \$ 0.00 = _____

Saturday Day use only: _____ x \$ 51.00 = _____

Sunday Day use only: _____ x \$ 38.00 = _____

Saturday & Sunday Day use: _____ x \$79.00 = _____

Total: \$ _____

For the Registrar Use Only:

Date Paid: _____

Pymnt Type _____

Pymnt Amnt: _____

S: _____ by: _____

Special Requests: ie: diabetic, snores, light sleeper, small children, food allergies, no hill, etc:

Roommate Requests: (all requests will be taken into consideration; however, not all will be possible)
