

**JESUIT RETREAT HOUSE PREACHED SILENT RETREAT
PRE-REGISTRATION FORM**

REGISTRATION FORM– Please PRINT clearly and fill in as completely as possible.

Check type of retreat: _____Weekend _____12-Step _____Couples _____Holy Week

Date of Retreat: _____ Retreat #: _____

Last Name _____ First Name _____ M.I. _____

Address/PO Box _____

City _____ State _____ Zip Code _____

Day Phone: _____ Evening Phone: _____

Cell Phone: _____ Email: _____

Occupation: _____ DOB: _____

Male _____ Female _____ Do you require an ADA Handicapped Room? _____Yes _____No

All retreats are silent. We are a nonsmoking facility. Smoking is permitted outside except the courtyard.

JESUIT RETREAT HOUSE

4800 Fahrwald Rd

Oshkosh WI 54902

PH: 920-231-9060 Email: office@jesuitretreathouse.org

A non-refundable **room reservation gift of \$50.00 per person** payable by check or credit card will be subtracted from your total retreat gift when balance is due at end of retreat.

Weekend Retreat \$390 Holy Week Retreat \$390 12-Step Retreat \$390

Couples Retreat \$600

CREDIT CARD INFO:

Name exactly as it appears on card: _____

Credit Card Number: _____ Security Code _____

Exp Date: _____ AE _____ MasterCard _____ Visa _____ Discover _____

Amount submitted: \$ _____ Signature: _____

**YOUR RETREAT RESERVATION CONFIRMATION WILL BE EMAILED UNLESS YOU HAVE
NO EMAIL ADDRESS THEN A CARD WILL BE USPS MAILED.**