



# Annual Church Retreat Application



2014: See Church Bulletin for weekend retreat date information.

Come join us for a time of spiritual fellowship and fun in the beautiful surroundings of Camp Kulaqua. This is what is available for those who attend:

- |                              |                           |                           |
|------------------------------|---------------------------|---------------------------|
| Fun & Fellowship             | Adult Sabbath School      | Nature Walk               |
| Delicious Meals              | Children's Sabbath School | Zoo / Nature Center       |
| Sunday Activities            | Church Service            | Hayride / Bonfire         |
| <i>A Better Choice Store</i> | Vespers                   | Gym/Basketball/Volleyball |

Please complete application and place in the offering plate or give to Millie Armstrong. You will receive a statement indicating the amount to be paid. Applications should be returned ASAP so accommodations can be secured.

**Please indicate how many will be attending in your party:**

Adults: \_\_\_\_\_ Children: \_\_\_\_\_ Age(s): \_\_\_\_\_

Type of LODGING desired:

\_\_\_\_\_ **Mini-Lodge** \$47.00 per room, per night.  
Sleeps 4-6 per room  
4 rooms /3 bath / per mini-lodge

Please bring your own bedding and linens for mini-lodges. Linen packets available @ \$8.75 per bed, per stay.

\_\_\_\_\_ **Family Chalet** \$86.50 per night.  
Sleeps 6-8 per chalet  
Linens & kitchen furnished in chalets only

\_\_\_\_\_ **R/V Sites** \$18.50 per night  
Electric, water & sewer hook-up, trash p/u,  
restroom & laundry facilities.

Check-In: Friday 3:00 p.m.

Check -Out Sunday 11:00 a.m.

PLEASE INDICATE THE NUMBER OF MEALS YOU WILL NEED:

Adult \$8.95 per meal, ages 8 & up.

Child \$7.95 per meal, ages 4-7. Child age 3 and under, no charge.

<b>Sabbath Breakfast</b>	Adult _____	Child _____	N/C _____
<b>Sabbath Lunch</b>	Adult _____	Child _____	N/C _____
<b>Sabbath Dinner</b>	Adult _____	Child _____	N/C _____
<b>Sunday Breakfast:</b>	Adult _____	Child _____	N/C _____

**NAME:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

Any questions or comments, please call Millie at 689-6064. You may begin paying each week if you choose, just mark tithe envelope "Church Retreat".