

2011-2012 RETREAT THEME



RETREAT REGISTRATION

Please register online or mail your completed registration form with your deposit to Holy Family Passionist Retreat Center.

PARISH/TOWN _____

RETREAT DATE _____

NAME _____

E-MAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____

BIRTH YEAR _____

Please indicate occupancy: ___ Single ___ Double

If Double, roommate: _____

___ New Retreatant ___ Enclosed is my \$100.00 deposit

RETREAT OFFERING \$250.00-\$275.00 (More if you can, less if you can't)
Mastercard, Visa or Discover accepted

Credit Card Type _____

Name _____

Number _____ Exp. Date _____

___ Enclosed also is my contribution for those needing financial assistance to attend retreats.

"I arrived on Friday in a state of hopelessness, confusion, and complete exhaustion with my life, and I left with new energy, new purpose and the most incredible sense of new hope."

-Retreatant, Middlebury, CT



HOLY FAMILY
PASSIONIST
RETREAT CENTER

303 Tunxis Road
West Hartford, CT 06107

www.holyfamilyretreat.org
holyfamilyretreat@cprov.org
860.521.0440