

# REGISTRATION

## *Rachel's Vineyard Weekend™ Retreat for Healing After Abortion*

- When:** Weekend of January 26-28, 2018  
*Retreat starts on Friday evening at 4:30pm and ends Sunday evening by 5pm or 6pm*
- Where:** The Williamsburg Christian Retreat Center, Toano, Virginia  
*(Directions will be sent with a letter to all registrants prior to the retreat)*
- Who:** For anyone who seeks healing from an abortion experience
- Cost:** \$185 *(includes private room, all meals and retreat materials)*  
**Note: If the fee is an obstacle to participation, financial assistance is available.**
- Questions:** For more information, please call: Linda Riva (757) 887-3144
- To Register:** Complete form below, enclose registration fee made payable to  
**St. Joan of Arc Church** and mail to: **Linda Riva, 100-D Republic Road  
Newport News, VA 23603**

*Register early since group size is limited for each retreat. We will confirm your registration.*

**NOTE: Inquiries, registration and retreat participation are strictly confidential.**

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Date: \_\_\_\_\_

\_\_\_\_\_ Yes, I would like to register for the *Rachel's Vineyard™ Retreat* the weekend of January 26-28, 2018.

\_\_\_\_\_ Enclosed is my check or money order for \$185.00 payable to St. Joan of Arc Church (no cash please).

Name: \_\_\_\_\_

**Please**

Address: \_\_\_\_\_

**Print**

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Clearly!**

Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Faith Denomination: \_\_\_\_\_

Contact in case of Emergency: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Special Health/Medical Conditions: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
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