

# Calvary Chapel Arizona Ladies Retreat

October 26 - 28, 2018  
Lost Canyon Retreat Center  
Williams, Arizona



You are invited to join us for the 15th Annual Arizona Statewide Ladies Retreat.  
The retreat is open to all ladies, High School age and above.  
*Nursing mothers with babies not yet walking are encouraged to attend.*

This year's theme is *"Hope, an Anchor for the Soul"* from Hebrews 6:19 .

The cost is only \$135 per person.

There is a \$35 non-refundable deposit due with your registration in order to reserve your space.

All reservations will be handled on a first come-first served basis due to space limitations.

The cost for the retreat includes . . .

2 nights camp style lodging (all linen and bedding is provided), three meals on Saturday and breakfast on Sunday (Friday evening meal is on your own).

**Early Registration is due by September 15, 2017**

**Late Registration fee of an additional \$10 applies after this date**

No cancellations or refunds, please bless someone else if you can't come.

*Please be advised: the retreat is located at a high elevation and may cause shortness of breath especially with those who have lung or heart issues.*

Mail the completed registration form below along with your non-refundable deposit of \$35 or full payment of \$135 payable to:

**Calvary Chapel Snowflake; Attn: Ladies Retreat, PO Box 450, Snowflake, AZ 85937**

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## Calvary Chapel Arizona Statewide Ladies Retreat 2018

*When filling out the form: Please print neatly. One person per registration. Thank you!*

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

Address: \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Church: \_\_\_\_\_ Ladies Ministry Coordinator: \_\_\_\_\_  
*The Church you will be coming with for the retreat (or Pastor's Wife)*

Roommate Preference (we will try to accommodate but cannot guarantee): \_\_\_\_\_

Do you have a medical condition that prevents you from walking up stairs (if Yes, please state)? \_\_\_\_\_  
*We cannot guarantee that we can give you a first floor room, but we will try; sorry, we cannot reserve bottom bunks.*

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Office Use Only: Check # \_\_\_\_\_ Name on Check: \_\_\_\_\_

Amount: \_\_\_\_\_ ( Deposit / Full Payment ) To Cover # of Attendees \_\_\_\_\_ Date Rcvd \_\_\_\_\_