

THE CALL ♦ March 26-27

High School Youth Retreat, Hosted by St. Joan of Arc Church, Kokomo.

Group Registration Form (Please submit before Wed., March 16, 2011 to avoid late fee or possibility of retreat filling up to maximum numbers.)

Each Parish or Group Leader must complete this form and *attach all* Individual Registration forms. In the event that we receive more registrations than our capacity of 150, registrations will be accepted in order of date received.

Questions? Call Ann Campbell at (765) 457-9757 or Brian Campbell (765) 865-9964 or email: bcampbell@saintjoan.org

Parish Name _____ Phone _____

Parish Address _____ City _____ Zip _____

Youth Minister or Group Leader Name _____

Your Phone _____ Your email _____

Names of ALL Chaperones attending with your group. (One adult for each eight students. We highly recommend that you bring at least 1 male and 1 female chaperone.)

_____	_____
_____	_____
_____	_____

Registration Fees:

Total number of youth and adults ____ x \$50 = \$_____ Total Balance due

*Please submit **one check** payable to St. Joan of Arc Church for the total balance.*

Please return this form and your check to:

**Youth Ministry Office
St. Joan of Arc Church
3155 South County Road 200 West
Kokomo, IN 46902**

T-Shirt Size Totals for Your Group	
____Small	____Medium
____XLarge	____2XL

Your Group Tally for Sleeping Arrangements (Including Adults)	
____ Male	____ Female

