



# HOPE Church Retreat 2016

## May 27-29, 2016

**Early Bird Registration (ends April 30):** Adult \$80, Student \$60, Children (age 3-12) \$30  
**Regular Registration (May 1 - May 15):** Adult \$190, Students \$160, Children (age 3-12) \$130, Infant (age 0-2): free

**Instructions:**

1. Please use ONE registration form per family
2. Rooms will be assigned on a FIRST COME FIRST SERVE BASIS.
3. Please fill in information and turn in to Richard Feng, Allen Chen, Jill Lai, or your fellowship group leader
4. Please fill out HOPE Church Retreat Consent Form and sign by your parents (or guardian) if you are under 18 years old
5. Cancellation prior to 4/30/16 @11:59PM will be eligible for full registration fee refund.

Name (English/Chinese)	Gender	Track <sup>1</sup>	Fellowship /Small Group	Fee <sup>2</sup> (rooming + food)	Additional Offering <sup>3</sup>
1.	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> 中文 <input type="checkbox"/> ENG <input type="checkbox"/> CHIL <sup>4</sup> (___/age: ___) <input type="checkbox"/> INF			
2.	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> 中文 <input type="checkbox"/> ENG <input type="checkbox"/> CHIL <sup>4</sup> (___/age: ___) <input type="checkbox"/> INF			
3.	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> 中文 <input type="checkbox"/> ENG <input type="checkbox"/> CHIL <sup>4</sup> (___/age: ___) <input type="checkbox"/> INF			
4.	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> 中文 <input type="checkbox"/> ENG <input type="checkbox"/> CHIL <sup>4</sup> (___/age: ___) <input type="checkbox"/> INF			
5.	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> 中文 <input type="checkbox"/> ENG <input type="checkbox"/> CHIL <sup>4</sup> (___/age: ___) <input type="checkbox"/> INF			
6.	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> 中文 <input type="checkbox"/> ENG <input type="checkbox"/> CHIL <sup>4</sup> (___/age: ___) <input type="checkbox"/> INF			
<b>TOTAL</b>					

**Mark here if interested in financial support/scholarship**

**Notes:** <sup>1</sup>Track to be attended: 中文(Mandarin), **ENGLISH**, **CHIL<sup>4</sup>**ren Program

<sup>2</sup> Other pricing: Part Time Option: Saturday-only with 3 meals \$80 (children & adults).

<sup>3</sup> Please indicate any additional offering you would provide to cover for overall retreat expenses. (Registration fees are not tax deductible; any other additional offering is tax deductible.)

<sup>4</sup> Please indicate which CHILD PROGRAM your child(ren) will attend (**A.** 3-5yr program; **B.** 6-12yr program)

**Contact Person Information**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**For Registration Committee only**

Date Received:	Registration #:
Check Amount:	Check #
Cash Amount:	Received By:
Total Received:	Room Assignment: