



Adult LJ3 Leader Registration

Friday 2/14 -- Sunday 2/16

Please Contact Gil ASAP if you are unable to attend

(gtrusty@ccphilly.org or 267-254-7121)

COST= \$45 - THIS IS DUE SUNDAY, FEBRUARY 2nd

Adult LJ3 Retreat Registration

Name: _____

Phone: _____

Paid \$45: **Cash** **Check** **Check #** _____

I have a Jr. High child attending the retreat (your cost is \$15)

Health Ins. Co.: _____

Policy #: _____

WHAT'S YOUR FAVORITE SNACK OR CANDY?
