



WNY Wesleyan Women's District Retreat Registration Form

November 7—November 9, 2013

(Must Be 18 years)

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Your Home phone _____ Cell Phone _____

Emergency contact info:

Name _____ Phone _____

Name _____ Phone _____

Rooming Request: please check which one

Rustic Cabin (up to 11 ladies) \$149 Retreat Center (2 or 3 ladies) \$159

Double Rooming

Triple Rooming

1st Name _____ Phone _____

2nd Name _____ Phone _____

3rd Name _____ Phone _____

Your home Church _____

Please complete and mail to Women's Ministry at

Eastern Hills Wesleyan Church, 8845 Greiner Rd, Williamsville, NY 14221

Please note we will do our best to fulfill your request but rooming is limited



WNY Wesleyan Women Retreat

I (PLEASE PRINT YOUR NAME) _____ UNDERSTAND THAT I WILL BE PARTICIPATING IN A WOMEN’S RETREAT IN THE OUTDOORS AND MAY BE SUBJECT TO RISKS AND DANGERS, INJURY OR ILLNESS WHICH MAY OCCUR IN PLACES WHICH, AT TIMES, MAY BE DISTANT FROM MEDICAL PERSONNEL AND FACILITIES.

IF ANY INJURY OR ILLNESS OCCURS WHILE SERVING WITH WNY WESLEYAN WOMEN PROJECTS, I CONSENT THAT FIRST AID, MEDICAL, DENTAL, SURGICAL TREATMENT OR OTHER ARRANGMENTS, THAT MAY BE NECESSARY IN CONNECTION WITH SUCH INJURY OR ILLNESS, CAN BE ADMINISTERED AND UNDERTAKEN AND WILL BE UNDER THE CONTROL AND RESPONSIBILITY OF SUCH PERSONS, MEDICAL OR DENTAL PERSONNEL OR FACILITIES AS ARE THEN AVAILABLE IN THE AREA AND TO WHICH I AM REFERRED BY WNY WESLEYAN WOMEN PROJECTS OR ITS REPRESENTATIVES.

Person to be contacted in the event of an emergency:

Name _____ Home Phone _____

Address _____ Work Phone _____

Relationship you _____

Alternated Contact _____ Work Phone _____

Relationship to you _____ Home Phone _____

Important medical information for emergency officials:

Are you currently under physician’s care for a medical condition? Yes No If yes, please list the condition:

Are you currently taking any prescription medications? Yes No If yes, please list:

Do you have any allergies? Yes No If yes, please list:

Please attach another piece of paper explaining any other factors we should be aware of in a case of emergency!