

**First Congregational Church of Long Beach  
Registration for Women's Spirituality Retreat – March 5-7, 2010**

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Vegetarian: \_\_\_\_\_ Special Needs: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Comments or requests: \_\_\_\_\_

\_\_\_\_\_

Office Use: Date received \_\_\_\_\_ Amt received \_\_\_\_\_ Scholarship \_\_\_\_\_ First Timer \_\_\_\_\_

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