



**FAITH AND SHARING  
NORTH AMERICAN RETREAT**

**FROM SUNDAY SEPTEMBER 8, 2019 AT 5 PM  
ARRIVAL BETWEEN 3 - 5PM  
TO FRIDAY SEPTEMBER 13, 2019 AT 2 PM**

**THEME:  
"Meeting Jesus  
in Community"**

**RETREAT CENTRE**

Manresa Jesuit Spiritual Renewal Centre  
2325 Liverpool Rd,  
Pickering, ON  
L1X 1V4  
Tel.: 905-839-2864

**COST** (amounts in Canadian Dollar):

|                        |             |   |
|------------------------|-------------|---|
| Registration:          | <b>\$40</b> | Non-refundable, payable at registration.  |
| Room and board:        |             | Pay according to your means with registration or on arrival.<br>Actual cost: <b>\$475</b> per person (5 days @ \$95)                    |
| <b>OR</b>              |             |   |
| Meals only (No room):  |             | Pay according to your means with registration or on arrival.<br>Actual cost: <b>\$275</b> per person (5 days @ \$55). Includes 3 meals. |
| Donation (optional):   |             | Specially to help people from far-off communities with travel expenses. See the "Fundraising" Form.                                     |
| <b>Total enclosed:</b> | <b>\$</b>   | Make cheque payable to: <b><u>Faith and Sharing Federation</u></b>  |

**PLEASE COMPLETE AND RETURN, BEFORE AUGUST 8, 2019, THE ATTACHED REGISTRATION FORM TO:**

FAITH and SHARING - North-American Retreat  
Isabelle Frappier  
1982 av. Marquis,  
Ottawa, ON, Canada  
K1J 8J4  
Contact:  
Tel.: 613-565-9435  
[isabelle\\_f@hotmail.com](mailto:isabelle_f@hotmail.com)

→→ USE A SEPARATE REGISTRATION FORM FOR EACH PARTICIPANT ←←

## FAITH AND SHARING NORTH AMERICAN RETREAT

SEPTEMBER 8 - 13<sup>TH</sup> 2019

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Street address: \_\_\_\_\_

Apt/Box number: \_\_\_\_\_

City: \_\_\_\_\_

Province/State: \_\_\_\_\_

Country: \_\_\_\_\_

Postal/Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

My local Faith and Sharing Community is: \_\_\_\_\_

### **COST** (amounts in Canadian Dollar):

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Don't let the price stop you from attending the retreat. A fundraising campaign is being done.

### **SPECIAL DIETARY OR OTHER NEEDS**

Special dietary needs? Vegetarian \_\_\_\_\_ Dairy free \_\_\_\_\_ Lactose free \_\_\_\_\_ Gluten free \_\_\_\_\_

Do you have any dietary allergies? If yes, specify \_\_\_\_\_

Is walking a problem? Yes

Premises are wheelchair accessible. Do you use a wheelchair? Yes

Any other needs? Please specify \_\_\_\_\_

If applicable, name of the person accompanying you: \_\_\_\_\_

### **ACCOMMODATION**

Rooms on ground floor or first floor with stairs. Most rooms have single beds. A few have twin beds on the first floor.

I need a ground floor room \_\_\_\_\_

I would like a single room \_\_\_\_\_ OR I will share a room with \_\_\_\_\_

I speak English \_\_\_\_\_ French \_\_\_\_\_ Bilingual \_\_\_\_\_

If you attend a particular church, please indicate which denomination you are.

(This helps with our worship planning). \_\_\_\_\_

### **TRANSPORTATION**

Will you need help with transportation: carpooling, financial assistance,... ? Yes

Can you provide transportation? Yes

Isabelle Frappier will contact you to make the arrangements.