



Episcopal Diocese of Albany



Priest Retreat Registration
November 3-6, 2015, Christ the King Spiritual Life Center
Registration Deadline: Monday, October 26th, 2014

Please print.

Name: _____

Name for Name Tag (Title optional): _____

Parish: _____ **City:** _____

Roommate Request: _____

Overnight lodging and meals (check or circle only one if you will be spending the night):

☐ Single occupancy, private bath \$209/person*

☐ Double occupancy \$189/person

☐ Double occupancy, shared bath, Barry House \$169/person*

☐ Camp staff cabin – single occupancy \$149/person[†]

☐ Camp staff cabin – double occupancy \$129/person[†]

*These rooms have limited availability and will be assigned on a first come, first served basis

[†]Camp staff cabins share shower facilities

Commuter (meals only – check “All days” if attending all the days OR check each day you will attend):

☐ All days, \$109 ☐ Tuesday, \$19 ☐ Wednesday, \$36 ☐ Thursday, \$36 ☐ Friday, \$19

Subtotal: \$ _____

(Less scholarship amount requested[‡]): \$ _____

Total Fee: \$ _____

[‡]If you require more than 50% of the subtotal, call Fr. Bob Haskell, 607-437-7431 for approval. Approval Code: _____

Please list any dietary needs and/or physical limitations:

Method of Payment (Mail form and payment to: Episcopal Diocese of Albany, 580 Burton Rd., Greenwich, NY 12834)

Check No. (made out the the Episcopal Diocese of Albany): _____

Credit Card (circle one): Mastercard Visa Discover

Card Number: _____ Expiration Date: _____

Name on the Card: _____ 3-digit code on back of card: _____

Card Billing Address: _____

Signature: _____

☐ Please send me The Albany Episcopalian at the following address: _____

☐ I would like to receive the Diocesan Update at the following e-mail address: _____