2016 Frontiers of Faith Registration Form

frontiersoffaith.com

| Name(s) of Registrant(s): | |
|---------------------------|--|
| | |
| | |
| Address: | |
| | |
| | |
| | |
| Phone #: | |
| Email: | |

| Item | Cost per person | Your Total Cost (multiply costs by # people) |
|--|-----------------|---|
| Accommodation | \$67.50 | |
| Meals (Includes brunch and dinner on Saturday and Breakfast on Sunday) | \$33.50 | |
| Linens & Towels | \$10.00 | |
| TOTAL | \$111.00 | |

Make check payable to: Renewed Heart Ministries

Send form and check to:

John F. Schneider 8847 278th Avenue Salem, WI 53168