

SPIRITUAL GROWTH RETREAT



April 28 through April 30, 2023

Lazy F Camp and Retreat Center, 16170 Manastash Road, Ellensburg, WA 98926

REGISTRATION DEADLINE: MARCH 10, 2023

HEALTH HISTORY

Name _____ Church _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Family Doctor or Healthcare Facility _____

Mailing Address _____ Phone _____

City _____ State _____ Zip _____

Emergency Contact _____ Phone _____

Secondary Contact _____ Phone _____

- If you are taking **medications** at this time and bringing them to the retreat, *please attach* a list of medications.
- If you have **special needs, dietary needs, or restrictions** that would affect your participation, *please attach* this information to the registration form.
- In signing this form, I hereby certify that this information is correct and complete as far as I know. I hereby give permission to the Retreat Leadership to provide routine health care, administer prescribed medications, and seek emergency medical treatment, including ordering x-rays or routine tests. In case of a medical need, I understand that every effort will be made to contact the above-named emergency contact person. In the event they cannot be reached, I hereby give permission to the physician selected by the Retreat Leadership to secure and administer treatment, including hospitalization. I agree to release any records necessary for insurance purposes. I authorize the use of photos for future publicity.

Signature _____ Date _____

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REGISTRATION

(Please check where appropriate)

- \$135.00 *Skyline Cabin—Upper Bunk (includes five meals, a towel, and bedding)
 - \$135.00 *Skyline Cabin—Lower Bunk (includes five meals, a towel, and bedding)
- *SKYLINE ASSIGNMENTS ARE ON A FIRST-COME, FIRST-SERVE BASIS.**
- \$125.00 Ridgeview—Upper Bunk (includes five meals; provide your own towel and bedding)
 - \$125.00 Ridgeview—Lower Bunk (includes five meals; provide your own towel and bedding)
 - \$120.00 Trading Post—Upper Bunk (includes five meals; provide your own towel and bedding)
 - \$120.00 Trading Post—Lower Bunk (includes five meals; provide your own towel and bedding)

Please List Roommates _____

Make checks payable to Pacific Northwest Conference UMW.

Please **send the completed registration form and a check for the total of \$**_____

to Sharon Stovall at 2311 E. Marshall, Spokane, WA 99207-5438.

Email [shrstovall@ peoplepc.com](mailto:shrstovall@peoplepc.com)

- Check if you plan to have a Chair Massage at an additional \$15.00. (To be paid on-site)

The Conference Scholarship form is on the PNWC UWF website.

Requests go to Linda Mills — wmil1218@aol.co or 12431 SE 198th Pl., Kent, WA 98031-0600