

REGISTRATION INFORMATION - 2016

(PLEASE READ CAREFULLY)

REGISTRATION FEE: \$40 per person. **This fee is already included in the lodging and meal costs below. There is no Additional charge.**

ACCOMMODATIONS:

COST PER PERSON ACCORDING TO NUMBER IN ROOM:

	1	2	3	4
Reynolds	\$277.36	\$197.70	\$173.42	\$168.06
Pitts/Booth	\$302.24	\$218.06	\$187.00	\$181.62
Robertson Inn	\$327.14	\$231.64	\$200.58	\$195.20
Turner Lodge	\$347.50	\$249.74	\$218.66	\$201.98

Cabins 10 (20 if using top bunks) \$137.30 per person

(Bring your own sheets, blankets, pillows, and towels for cabins.)

HOW TO REGISTER – Paper Registration

1. Fill out the form or a copy of it for each person attending.
2. Enclose full amount for accommodation of your choice. ANY INDIVIDUAL CANCELLATION AFTER OCTOBER 1 WILL RESULT IN A FORFEITURE OF \$20.00 PER PERSON + \$40.00 REGISTRATION FEE. ANY INDIVIDUAL CANCELLATION WITHIN 72 HOURS OF ARRIVAL WILL RESULT IN FORFEITURE OF THE FIRST NIGHT'S CHARGES PLUS THE REGISTRATION FEE.
3. Roommates should send in separate forms and payments together.
4. Mail to: Epworth, PO Box 20407, St. Simons Island, GA 31522. FAX: (912) 634-0642
5. Epworth handles all room requests, registration and retreat grounds information. Please call them for any questions at (912) 638-8688. No registrations taken by phone.
6. Reservations may be made at any time after deadline as space allows.

You must notify Epworth if, after registering, you find that you are unable to attend. You may transfer your registration to someone else, but it is still necessary to give Epworth the name of the person replacing you. This is done in order that rooms may be properly set up in advance. Upon arrival, the person receiving the transfer should give her name and address to the Winning Women desk in order to insure her name is placed on our mailing list.

Clip and Mail

Registration form and full payment must be received by October 1, 2016

Winning Women for Christ, Inc. October 14-16, 2016

Registration Request — Please Print

Name _____ Daytime Phone _____

Address _____ Email _____

City _____ State _____ Zip _____

Motel requested (granted on a first received basis) _____

Please Circle: 4 per room 3 per room 2 per room single cabin

List Roommates: 1. _____ 2. _____ 3. _____

I will arrive after 6 p.m. This is my first retreat.

Limited scholarships available for first time attendees — contact Linda Froman at (386) 761-8284.

Enclose full payment. Check MasterCard Visa Discover

Make checks payable and mail to:

Epworth-by-the-Sea Account # _____ Exp. Date _____

PO Box 20407

St. Simons Island, GA 31522 Amount to be charged \$ _____ Name on Credit Card _____